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ABSTRACT

This double issue of the "Family Resource Coalition Report" contains 13 articles focusing on culture and family-centered practice, along with a resource section listing organizations, trainers, consultants, and publications. The following articles are included: (1) "Developing a Knowledge Base to Support Cultural Competence." (Terry Cross); (2) "Why Is Cultural Competence Important? A Practitioners View" (interview with Blanca Almonte); (3) "Native Language and Family-Centered Practice" (Lourdes Diaz Soto); (4) "From Self to Other: Enhancing Communication across Cultures" (Brenda Rodriguez); (5) "The Challenges of Multiculturalism in One Head Start Program" (Barbara Becker); (6) "An Afro-Centric Perspective on Developing Cultural Identity" (Maisha Sullivan); (7) "Difference and Power in Therapeutic Practice" (Elaine Pinderhughes); (8) "Parent Education to Battle Oppression" (Bisola Marignay); (9) "How Hospitals Move Toward Cultural Competence" (Guadalupe Lara); (10) "Helping to Build Intentional Communities" (Nancy Ware); (11) "Assessment with Native American Families" (Amy James); (12) "Supporting Families with a Refugee History" (Ngoc-Diep Thi Nguyen); and (13) "Storytelling as the Life Force of an Organization" (Raymond Reyes). (BGC)

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CULTURE AND FAMILY-CENTERED PRACTICE

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Many knowledgeable, resourceful people helped make this *Report* a substantial, thoughtful collection of writings on Culture and Family-Centered Practice. Jill Garcia, Kai Jackson, Olga Nieto, Shamara Riley, Brenda Rodriguez, Israel Romero, Layla Suleiman, Lourdes Sullivan, and Aaron Worthy gave their time and energy early on to suggest authors and topics that would make this *Report* address the concerns of those who work with and advocate for families of many different cultures, in a variety of settings. Several of these people also reviewed drafts of articles and offered valuable feedback. The broad spectrum of opinions and backgrounds represented here are largely due to their thoughtfulness and generosity with their time.

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Most of all, FRC and the *Report* staff thank the many authors who shared their meaningful experiences and profound thoughts on what it takes to empower families of many different cultures through family-centered practice. The backgrounds of these authors vary widely; together, their writings make a resource that FRC expects to be meaningful, useful, and transformative in many settings in which families are present now and in the years to come.

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Table of Contents

Developing a Knowledge Base to Support Cultural Competence 2
Terry Cross

Why Is Cultural Competence Important? A Practitioner's View 5
Interview with Blanca Almonte

Native Language and Family-Centered Practice 8
Lourdes Diaz Soto

From Self to Other: Enhancing Communication Across Cultures 11
Brenda Rodriguez

The Challenges of Multiculturalism in One Head Start Program 16
Barbara Becker

An Afro-Centric Perspective on Developing Cultural Identity 17
Maisha Sullivan

Difference and Power in Therapeutic Practice 20
Elaine Pinderhughes

Parent Education to Battle Oppression 24
Bisola Marignay

How Hospitals Move Toward Cultural Competence 25
Guadalupe Lara

Helping to Build Intentional Communities 27
Nancy Ware

Assessment with Native American Families 28
Amy James

Supporting Families with a Refugee History 30
Ngoc-Diep Thi Nguyen

Storytelling as the Life Force of an Organization 32
Raymond Reyes

Resource File

Organizations, trainers and consultants, and publications to help you and your program 36

Developing a Knowledge Base to Support Cultural Competence

by Terry Cross

Photo by Marilyn Nolt

Developing cultural knowledge is a key element of becoming culturally competent—of functioning effectively within another person's or family's culture. Many who work with families ask if it is possible to know everything one needs to know about every culture. Given the vast number of cultures and subgroups within cultures, this is a legitimate concern. The average practitioner cannot achieve comprehensive knowledge of all of his or her clients' cultures.

However, there are a number of key topics about which any family-centered practice professional should have a working knowledge. It is important to learn enough to know when to seek out more information, know where to turn for reliable information, and ask good questions. It is also important for practitioners to learn what culturally influenced issues affect the families with whom they work.

Following is a discussion of several types of information with which professionals in the field should be familiar, and that agencies that work with families should institutionalize. Topics that have important implications for child-rearing and child protection and are frequent sources of misjudgment and misdiagnosis are described.

How Can We Learn?

One of the major problems in gaining knowledge about other cultures is knowing where to find that information. Human service professionals tend to learn about other cultures through the media, public education texts, and their own perceptions of experiences with clients. None of these resources can be counted on to give accurate pictures of cultures. In fact, they can be filled with stereotypes, misinformation, and deficit models. Even cultural awareness training can create stereotypes when cultures are described as monolithic. Good information too generally applied often contributes more to confusion than to clarity.

In addition, learning about a culture from troubled families prevents the professional from learning the strengths and beauty of a culture. Practitioners, administrators, and policymakers need to find and learn from healthy and strong members of the different groups they serve. Professionals who think of cultures as they were generations ago, who romanticize cultures, or who fail to see cultures as complex, dynamic, changing systems will quickly fall short of the goal of effective services. Given these complexities, where does one turn?

Some effective steps to take to learn more about a culture are:

- First, spend more time with strong, healthy people of that culture.
- Second, identify a cultural guide—that is, someone from the culture who is willing to discuss the culture, introduce you to new experiences, and help you understand what you are seeing.
- Third, spend time with the literature. Reading articles by and for persons of the culture is most helpful. Along with the professional literature, read the fiction. This is an enjoyable way to enter the culture in a safe, nonthreatening way. Find someone with whom you can discuss what you have read.
- Fourth, attend cultural events and meetings of leaders from within the culture. Cultural events allow you to observe people interacting in their community and see values in action. Observing leadership in action can impart you with a sense of the strength of the community and help you identify potential key informants and advisors.

- Finally, learn how to ask questions in sensitive ways. Most individuals are willing to answer all kinds of questions, if the questioner is sincere and motivated by the desire to learn and serve the community more effectively.

When learning from individuals, it is important to treat each individual as an expert on his or her experience of the culture, but not as a representative of that group or an expert on the culture. No one can speak for his or her whole group. Each person whom you contact can provide you with a small piece of a much larger picture. If you treat what is said as part of a large mosaic, you will eventually develop a good working knowledge of that culture.

Diversity Within Diversity

One potential barrier to learning about cultures is the great diversity among and within the various groups. Human services professionals most often learn about cultures as if all individuals of the culture were the same, and represented an intact traditional background. In reality, tribal and regional differences as well as varying levels of acculturation and assimilation contribute to diversity. When providers of family-centered support and services gather specific facts about the expressive behaviors of a client's cultural community—such as language, music, family, religion, food, etc.—they are acquiring essential knowledge. In addition, they must identify any subgroup, such as a tribe, that influences these behaviors, and understand the level of the individual's or family's assimilation or acculturation.

African Americans are not a homogeneous group. Some are strongly influenced by the South, some by the West Indies, others by urban experiences. Asian/Pacific Islanders come from dozens of different countries, languages, cultures, histories, and religions. Native American groups differ because of tribal, geographic, and language differences. Hispanic groups are equally diverse and vary in their history, ethnic and national origins, and religion. The family-centered practice professional should always consider and look for the diversity that exists in any group of people. Diversity is also a result of assimilation, the immigration experience, and a group's history of oppression or economic status. Sexual orientation, urban versus rural settings, gender, and generation all contribute to the complexity of cultural identity. "Mixed-race" individuals account for another aspect of diversity. We cannot, therefore, describe in simple terms what an Indian is, or what an African American is, or what a member of any other cultural group is. We cannot reliably predict anyone's behavior, values, or beliefs.

What good, then, is the information gathered through spending time with strong, healthy people of the culture; interacting with a cultural guide; reading the literature; attending cultural events and meetings; and asking questions? What can be learned that is of use? What can be learned is how culture functions in people's lives and what meaning that culture has for the practitioner's concepts of health and healing, relationships, help seeking, and child rearing. Culture shapes and influences behavior. It does not determine it. Each person interacts with his or her culture in a unique way and is a complex blend of individual and cultural characteristics. And, just as we cannot understand behavior without a knowledge of the individual, neither can we understand the person without awareness of the context within which they function.

Given the necessity of understanding cultural context, the family-centered practice professional must learn how the participant interacts with the culture in which he or she functions, what the culture means to him or her, and how the practitioner's perceptions are a product of clinical and cultural forces. To accomplish this, we must know something about the aspects of culture that most often shape family behavior and which can be examined and understood. Generally, the cultural forces that are the most fruitful sources of information for family-centered practice relate to meeting basic human needs that have to do with relationships, identity, and self-actualization.

What Knowledge is Needed?

To work toward culturally competent practice, family-centered practice professionals need to acquire knowledge on: the impact of a culture's history on families, the role of acculturation and assimilation, patterns of communication, family structures, cultural norms and values, etiquette (i.e., what people respect and how they show it), spirituality and its impact on concepts of health and healing, and help-seeking and problem-solving behavior.

These aspects of culture are discussed below in general terms. There are, of course, others that help shape behavior. Examples from various cultures are used to illustrate the issues presented here. To use examples is to risk creating new stereotypes. None of the examples can be used to predict behavior; rather, practitioners can use them to spark their own thinking and to sensitize themselves to the importance of culture in their relationships with and ability to support program participants.

Cultural History

Each person has a unique cultural history. That history includes the history of his or her relationship with the mainstream culture, the federal government, and the helping professions. It is beneficial for helpers to learn about this history. For African Americans, this includes the impact of slavery and of a hundred years of systematic oppression. The cultural history of Native Americans includes the impacts of genocide (the Native American population has gone from 10 million to 200,000 in 400 years)[1], boarding schools, and treaties and government-to- government relations. For Asians, cultural history may include immigration of the first laborers, exclusion laws, and the refugee experience. Finally, for the Hispanic American, it may include the relationship of the United States with the nation or region of origin, or the impact of wars and resulting boundary changes (such as the experiences of those who were Mexican and then became American as a result of these changes).

Each group's well-being today is influenced by the past. Each group has made significant contributions to the mainstream, and has exhibited great courage and strength in facing the challenges of continuing to exist. Learning some of this history and linking it with current issues can be very useful to building cross-cultural understanding.

Acculturation and Assimilation

In the United States, most people of color experience the influence of mainstream American culture on their identities, customs, values, and ways of life to varying degrees. They may adhere to the traditions of their own cultures, or assimilate into the mainstream almost totally. Between these two extremes are those who could be called acculturated. Acculturation is the process by which people of one culture learn to adjust their behavior to accommodate the rules and expectations of another culture. The individual does not give up his or her

What Is Cultural Competence?

The word "culture" describes the integrated pattern of human behavior that includes actions, assumptions, values, reasoning, and communication of a racial, ethnic, religious, or social group. The word "competence" is "the state of being capable" (Webster's 1977) of functioning in a particular way. Therefore, culturally competent services are systems, agencies, and practitioners that have the capacity, skills, and knowledge to respond to the unique needs of populations whose cultures are different than that which might be called dominant or mainstream American.

Cultural competence can and should occur in both individuals and organizations. Cultural competence is a set of congruent behaviors, attitudes, structures, and policies that come together to work effectively in intercultural situations. That set of behaviors can be adopted and practiced by a solitary professional or an entire organization.

The culturally competent organization:

- values diversity,
- conducts cultural self assessments,
- is conscious of and manages the dynamics of difference,
- institutionalizes cultural knowledge, and
- adapts services to fit the cultural diversity of the community served.

Historically, our field has approached cultural competence as if it were primarily the responsibility of individual practitioners. Both development and delivery of culturally competent services were thought to hinge on the "sensitivity" of the providers. However, it is impossible for individuals to function successfully in isolation. Cultural competence depends on social institutions, organizations, agencies, and working groups, as well as individual professionals. Together, they equal a system that fosters effective work in cross-cultural situations. Cultural competence is the responsibility of the total system. This means our discussion must include the rules, regulations, infrastructure, and policies of agencies and institutions as well as the knowledge, skills, values, beliefs, and attitudes of individuals.

In Short ...

Cultural competence for the individual: *The state of being capable of functioning effectively in the context of cultural differences.*

Cultural competence for the organization: *A set of congruent practice skills, attitudes, policies, and structures, that come together in a system or agency or among professionals and enable that system, that agency, or those professionals to work effectively in the context of cultural differences.*

What Is Culture?

Culture is the combination of thoughts, feelings, attitudes, material traits, and behaviors of a group of people. Each of these characteristics is manifested and shared by the group through symbols, communication, and social patterns. Webster's (1975) defines culture as "... the integrated pattern of human behavior that includes thought, speech, action; ... the customary beliefs, social forms, and material traits of a racial, religious, or social group."

Each culture's conventions satisfy basic human needs, from the perspective shared by that group of people. Some believe that people are "all the same underneath," yet a paradox exists: we are the same in our basic human needs, yet different in the ways in which we meet those needs. Culture is a complex system of learned and conditioned responses to our needs, and thus culture is one of the greatest resources for helping human service providers understand family needs and strengths.

In Short ...

People are largely the same in their basic human needs.

People differ in their conditioned and preferred ways of meeting those needs.

culture in the process, but retains the identity, customs, and most everyday behaviors of his or her culture of origin. Assimilation is the process by which an individual adopts the new culture as his or her own and takes on the identity, customs, and values of the other culture, largely abandoning the culture of origin.

The acculturation or assimilation processes also present families of color with issues that must be understood by the helping professional if he or she is to be helpful to the family.

Communication

Communication is an important part of all cultures. It is essential to have some understanding of how individuals communicate, as well as the patterns that govern conversation. Things to learn about include language differences, patterns of speech, nonverbal communication, and the use of slang or colloquialisms.

Patterns of speech are not always obvious. Members of cultural groups (such as some Native Americans and Asians) who tend to pause longer between words may be unfairly labeled as slow, quiet or even stupid. Those who pause for shorter periods (such as some African Americans and Hispanics) may be unfairly labeled as pushy or rude. African Americans, who may gesture more and use symbolism in their speech more often than most Americans, are sometimes seen as angry or volatile when they are not. Members of cultural groups who may use more of a storytelling approach than interactive conversation when communicating (such as Asians and Native Americans) can seem shy, uncooperative, or out of touch with the situation to professionals from other cultural groups [2]

Family Structures

Knowledge of family structures includes understanding what kinship and roles mean from the perspective of the program participant.

Typically, kinship patterns within the four major ethnic groups of color consist of extended families, unlike the mainstream culture and its nuclear family model.[3] Frequently, the concept of extended family is not limited to blood relations. Fictive kin or "as if" relatives are commonplace. The practitioner with cultural knowledge knows to assess the supportive relationships of "kin" who may not be biologically related to the family. Elders may be called by kinship titles whether or not they are related.

A Practitioner's View of Cultural Competence

FRC Interviews Blanca Almonte

Director of Program Services
Family Focus, Inc.
Chicago, Illinois

FRC: What is cultural competence?

Blanca Almonte: There are several definitions for me depending on the context in which the term is used. Personally, I feel it is the ability to move beyond sensitivity and relevance in cultural relations. It is a life-long process in acquiring knowledge and skills which help in attempting to understand other cultures and facilitate the understanding of my culture and the culture I live in, including inconsistencies, biases, and blind spots.

As a family support professional, it is the ability to understand the effect of culture on child rearing and family relationships, and the ability to tailor my behavior accordingly. At the organizational level, it has to do with inclusion, responsiveness, and equity.

FRC: What is the value of cultural competence for effective practice?

BA: At the organizational level, I believe it's important for organizations to realize that cultural competency encompasses more than race or ethnicity. We cannot even pretend we provide any kind of effective services if [these services] are not mindful of women, geographic location, and sexual preference under the definition of cultural competence. In order to effectively promote cultural competence, we need to have a broader definition of various influences on families.

At the practitioner level, I believe it's important that we don't impose our values on someone else because they're different. A great deal of what we consider "good practice" is based on our own cultural assumptions. For example, almost everything that is written about child rearing focuses on the need to promote children's independence. However, the focus on independence is a middle-class white construct. In many other cultures, interdependence is what is valued in childrearing. However, [this interdependence] gets misinterpreted as dependence, from the point of view of mainstream culture.

FRC: How can programs and practitioners build cultural competence?

BA: First, you've got to be aware of your knowledge of your own culture ... [and] cultural biases which we all have. Second, you need to be willing to truly interact with and listen to people from other cultures. Third, you need to be willing to modify your own behavior.

Often, our idea of cultural competence is understanding families so we can change them, so they are more like us, and that's not what cultural competence is about. We need to move away from the tourist approach to learning about other cultures. I believe it's important to focus on concepts and examine the variations across cultures. If you focus on one culture, then you tend to stereotype people and overgeneralize things like, "all Hungarians do this."

Lastly, we really need to be aware of our tendency to attribute our personal motivations to the behavior of others.

FRC: What concrete steps can programs and practitioners take to assess their level of cultural competence?

BA: I am not really comfortable telling [programs and practitioners] how to assess their level of cultural competence. Part of it is perhaps their ability to establish relationships with people who will tell them honestly whether they are meeting their needs, and that they're always learning.

However, I am comfortable telling you what I see as some of the signs that point to a program's or practitioner's efforts to be competent. First, they can offer opportunities for individuals to truly examine their own cultural beliefs and values on a personal, professional, and organizational level. Second, a program or practitioner can establish an atmosphere which encourages openness, honest communication, and opportunities to discuss issues related to culture in a non-traditional manner.

Another way to increase culture competence is to encourage the acquisition of conflict resolution skills across cultures. Overall, practitioners and programs should emphasize the advantages of diversity. This emphasis includes acknowledging the contribution of all people, the celebration of differences, the recognition of similarities, and a clear commitment to seeing differences as differences and not deficits. To increase cultural competence, I would also look for staff and activities which reflect any and all cultures represented in the community in which the program functions.

Interview was conducted by Shamara Riley, communications assistant for the Family Resource Coalition.

Photo by Marilyn Nolt

Aunts and uncles may have active parenting roles and may even be referred to as mother or father. Within traditional African American cultural communities, the relationship with a mother or mother figure, "Mama," "Big Mama," "Play Mama," etc., is intimate and sacred, and is powerful, like all kinship relationships in the culture. Cousins may be called brother and sister. Some Native American and Asian languages have words for relatives for whom English has no specific terms.

Extended family members may or may not reside in the same household. Households often seem chaotic to the outsider, because it is difficult to tell who resides permanently in the household and who does not. This is often a sign of family strength and unity, but may be misread as a sign of instability to those familiar only with the nuclear family experience.

For several cultures, extended family networks are primary and supportive in spite of geographical distance. Practitioners can honor individuals' membership in a support network by repeatedly consulting with them in times of decision making. Often community and gender-specific groups are part of the support network. Barber shops, beauty parlors, and funeral homes are examples of community-based venues used by traditional African American culture for consultation. The practitioner with cultural knowledge knows to regard these as venues of support networks for families.

While the family structures of many communities of color are similar in the nature of their kinship patterns, they vary when it comes to roles, and there are some basic role issues that tend to be misinterpreted by practitioners who are working with families of cultures other than their own. Generally speaking, gender roles in Native American and African American cultures tend to be more flexibly defined than the gender roles of most Americans.[4] Men and women may share work, child rearing, homemaking, leadership, and other responsibilities. Men, for example, may play a large role in nurturing the young. These flexible roles may be temporary or permanent and tend to be based in both historical circumstance and traditional cultural values concerning dignity of the genders.

Also, generally speaking, roles assigned to both genders in Hispanic and Asian cultures tend to be more rigidly defined than those in American mainstream culture, and carry set responsibilities.[5] Roles may depend on age as well as gender and be directly affected by acculturation and assimilation. Understanding gender roles includes understanding the responsibilities attached to each role, and how the role structure affects the well-being of the family or community.

Norms and Values

Values are central to the functioning of a culture. Just as understanding the influence of American mainstream values is important, so is understanding the values of other cultures important. Many times, specific values are shared across cultures, but some cultures may assign more or less priority to them than other cultures do. Values do not describe individuals in a culture, nor do they predict individual behavior. Values provide a context within which people make decisions and choices, including major life choices. Most individuals are unaware that the values of the society around them shape their decisions, but feel pressure when they try to go against the prevailing norms.

When values of different cultures conflict, the most severe misjudgment and misapplication of resources can occur. Because values influence how individuals think and act and how they choose to conduct their daily lives, family-centered practice professionals are encouraged to spend time learning about the cultural values of the people with whom they work and how they help shape behavior.

Professionals working with families must learn about the variables unique to families' cultures that may be subject to misinterpretation within the protective services system. Native American children, in particular, are often mistakenly thought to be abused as a result of having "Mongolian spots," which appear on many children of color and can appear to be bruises. Some cultural healing practices (e.g., the Southeast Asian practice of coining and cupping) may leave bruises on a child. These practices clearly are not child abuse, just as immunizations, which also cause bruising, are not.

In some Latino cultures, the family conducts a ceremony in which adults kiss an infant male child's genitals. In some cultures, adults surgically remove a

portion of the infant male's genitals at or within several weeks of birth. In some Pacific Island cultures, crying infants are quieted by gentle rubbing of their genitals. These practices, which are not abusive if done in the context of a family or community ritual, would be considered abuse—sexual or otherwise—under the laws of most states.

Etiquette

One of the primary reasons people of different cultures experience difficulties in working with one another is that we seldom know or respect the basic rules of etiquette of the other group. We must be willing to ask what is polite and what is rude, and to use that information to act with respect. We should check on the use of proper manners before, during, and after the helping process.

For example, among most African Americans the use of first names is reserved for those who are very well acquainted with each other and are of similar ages. Many professionals are taught to believe that the use of first names encourages rapport. These two practices are incompatible.

Spirituality

Spirituality and/or religions play important roles in how various individuals conceptualize health, mental health, problem solving, and help seeking. The major ethnic groups of color in the United States share a high regard for and reliance on spirituality in their communities and daily lives. Each of the groups is diverse in its religious preferences, and their spirituality and religions range from traditional indigenous ways to modern religions. Spirituality among these groups represents not only a set of beliefs and practices, but a central theme for understanding all life and behavior. The values of each group are supported by sustaining spiritual values and, in each group, natural helping and healing are primarily spiritual in nature.

Not all people of color are actively involved in a spiritual life. Nonetheless, spiritual activity is usually not far removed from their experiences. Many members of these groups understand problems in spiritual terms, and experience help and healing as coming from spiritual forces.

Professionals working with Hispanic Americans, must be aware of the church's role in helping and understanding problems, as well as traditional Native American and African beliefs that influence the spirituality of program participants. For Asian Americans and Pacific Islanders, Confucianism, Taoism, Buddhism, Island beliefs, and/or Christianity may have been influential. For African Americans, any of a vast array of churches, as well as traditional African beliefs, may be important; the role of the church as community is most important. For Native Americans, spirituality may be defined by tribal history and traditional religion or by any variety of Christianity. Each Native American reservation may have many different religions.

Spiritual leaders in communities of color are often the best and most readily available sources of information, help, and partnership in planning successful family-centered practice in that community. Within each of the cultures described, people tend to seek help first from their own family and second from the spiritual leaders or teachers of their group. If families are to be supported successfully in any of these cultures, the child- and family-serving systems must first join in a partnership with the spiritual communities of each group. Without this linkage, agencies may find their success limited to isolated cases.

Help Seeking and Problem Solving

Finally, the practitioner should be aware of how families are expected to seek help in their culture, and whether they are able to use the problem-solving methods and resources that are available in their own culture. Failure to use existing resources may indicate a lack of group esteem and may signal of cultural self-hate. It may also indicate that the family is estranged from its main systems of support. In other situations, it may mean that the program participant is not closely identified with his or her own culture.

Help seeking is well defined in some cultures. For example, seeking support outside some Asian families would be seen as taboo, and as an act that would bring shame to the family. In some Native American families, seeking the help of elders before seeking help elsewhere is showing elders the proper respect. Unless workers know these patterns, and the ways in which the family relates to the patterns and why they do so, behavior can be easily misjudged.

Summary

The above discussion is intended to create a starting point for raising the level of discussion of cultural differences beyond stereotype and to examine the meaning of culture in our clients' lives. Professionals should be aware enough of these differences to refrain from forming erroneous conclusions when expected behavior does not match encountered behavior, and should begin the assessment of families based on norms of the client's community.

The core question to be asked is: what does the family's behavior mean in their cultural community? To answer, it is necessary to have specific knowledge about the culture, including what symbols are meaningful, how health is defined, and how primary support networks are organized. Family-centered practice professionals should examine the relationship between the program participant and his or her cultures, and the complex dynamics that result from that interaction. Only then can an appropriate and culturally competent assessment of family functioning be made.

Terry Cross is the founder and director of the National Indian Child Welfare Association (NICWA) and is a primary consultant with the National Resource Center for Family-Centered Practice. He can be reached at NICWA, 3611 S.W. Hood, Suite 201, Portland, OR 97201, 503/222-4044 (phone), 503/222-4007.

Notes

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Native Language and Family-Centered Practice

by Lourdes Diaz Soto

Photo by Marilyn Nolt

For many Americans today, the idea of children in the United States speaking in languages other than English arouses fear and anxiety. Even Presidential candidates and politicians are working hard to ensure that children receive an English-only education in America. The socio-political context of the nation is contributing to linguistic repression, yet native languages and native cultures are at the heart of the communicative process for families in our linguistically and culturally diverse society.

Contemporary families face multiple, complex challenges within the existing societal context, and non-English-speaking families, those for whom English is a second language, and families of color face additional human rights issues. Linguistic repression is just one part of the rising conservative agenda that families of color in America face. Other signs of this agenda are the passage of California's Proposition 187 (and the continued support it enjoys despite having been declared unconstitutional by a federal judge), and legislative budgetary mandates that punish the most vulnerable in our nation. The national identity has been popularly constructed as "white, heterosexual, middle class, and allegedly threatened by contamination from cultural, linguistic, racial, and sexual differences."[1]

Can we afford to tolerate the existing American social climate that devalues languages and cultures? Has the myth of the English-only "American dream" become a nightmare for language-minority children? John F. Kennedy stated: "The greatest enemy of the truth is very often not the lie—deliberate, continued, and dishonest; but the myth—present, persuasive, and unrealistic."[2]

Why English-Only is a Myth

Historical accounts of language learning document that German-language schools prevailed until the twentieth century, and that historically significant documents such as the Articles of Confederation were published in German and French. When the U.S. entered World War I, however, anti-German sentiments created language restrictionism. Several states passed laws banning German speech; at least 18,000 persons were charged under these laws by 1921. Soon the push toward Anglo-conformity affected all minority languages.

Native Americans were also mandated by the federal government to learn only English at school, in spite of the fact that in the 1850s the Oklahoma Cherokees attained higher English literacy levels than the white populations in Texas and Arkansas. In 1879, Native American children were being sent to military-style boarding schools, where they were separated from their families, their language, and their cultures. "Both my grandparents were forcibly removed from their homes and placed in boarding schools," recalls U.S. Representative Ben Nighthorse Campbell. "One of the first English words Indian students learned was soap, because their mouths were constantly being washed out for using their native language."[3]

At the end of the Mexican-American War, the Treaty of Guadalupe Hidalgo gave Spanish equal status with English as the language of government in California and other territories that had ceded to the United States. The treaty

said that new Spanish-speaking citizens "shall be maintained and protected in the free enjoyment of their liberty and property, and secured in the free exercise of their religion without restriction" and protected their access to legislatures, courthouses, and schools regardless of English- speaking abilities. The Spanish-speaking families of Puerto Rico also predate English-speaking colonizers and have sought to protect their home language in their own land. In 1909, when only 3.6 percent of Puerto Ricans spoke English, 607 out of 678 grade schools were mandated to use English as the medium of instruction. By 1913 legislators were demanding the reinstatement of Spanish, but U.S. officials blocked the change until 1949, when the failure of the attempted change was acknowledged.[4]

Latino families, like so many other families, have worked hard and contributed to the welfare of the nation. They also comprise the fastest-growing ethnic minority population. Yet the data show high poverty rates, low levels of educational attainment, and under-representation in programs designed to help "at-risk" students.[5]

Family Support is Multilingual

The idea of imposing English-only advice needs to be abandoned because it hurts families' ability to communicate. Intergenerational communication is a vital part of child-rearing patterns that foster children's well being. "When what is lost is the means of communication in a family, the children lose access to all the things parents can teach them. Where the parents are able to speak English, the loss is not complete. If the parents are willing to switch to English too, they can go on socializing their children in the values, beliefs, and practices that are important to the family and community. When the parents are not able to do so, what is lost is closeness and family unity. That may be too big a price for children to pay for an easier transition from home to school."[6]

Affording children and families the gift of home language preservation has been shown to be beneficial in a variety of ways. Cummins notes that native language instruction develops pride in one's identity, which has been shown by research to be linked to school achievement.[7] Bilingual children also have certain advantages that monolingual children do not have. One of the most important is "cognitive flexibility" or divergent thinking. Using children's home language as a medium of instruction is important because, (1) it supplies background knowledge that makes English more comprehensible; (2) it enhances the development of literacy, since knowledge is transferred from the home language to the second language; and (3) first-language development has cognitive advantages, practical advantages, and promotes a healthy sense of biculturalism.[8]

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When parents, grandparents, and extended family members lovingly impart values, beliefs, and cultural wisdom to children, children have an opportunity to attain a healthy sense of self. This cannot occur unless different generations in a family speak the same language. Successive generations lose their native language as grandchildren are unable to communicate with their grandparents. The loss can be especially tragic for cultures with oral traditions, since these languages cannot be retrieved. In Pennsylvania, for example, we can find only five native speakers in the Lenne Lanape Delaware Indian tribe.

The loss of language and loss of intergenerational communication is bound to intensify given the growing number of immigrants into the U.S. Over the last decade, the number of school-age children who speak languages other than English has increased by 38 percent. U.S. Census Bureau data show that 6.3 million children and 31.8 million people (14 percent of the population) speak a language other than English at home. "More and more people in the United States speak languages other than English at home," writes Dorothy Waggoner. "The changes reflect the extent and character of recent immigration. They also reflect the natural growth of linguistic minority populations."[9] The numbers of speakers of Spanish, Asian Indian languages, Chinese languages, Korean, Thai and Laotian, Vietnamese, Farsi, Filipino languages, Arabic, Armenian, Japanese, Portuguese, and Russian are increasing. There are fewer and fewer speakers of American Indian and Alaska native languages, Czech, French, German, Greek, Hungarian, Italian, Norwegian, Polish, Serbo-Croatian, Swedish, Ukrainian, and Yiddish. These data point to the dramatic multilingualism in America, as well as the need for linguistic preservation.

The need to reclaim linguistic and cultural knowledge is determined by the needs of children in our communities and our society. Our nation is implicitly and explicitly encouraging the loss of home languages. From the child's point of view, it is clear that you are expected to shed your family language and culture in order to be acceptable to the mainstream society.

However, losing your language and losing your culture does not guarantee your attainment of the mythical American dream.

The Struggle in Steel Town

For the past four years I have conducted observations of family support program participants in Steel Town, a community that has devalued children's languages and cultures. An oppressive climate in Steel Town has resulted in a variety of losses including children's

educational opportunities and the family's political voice. The "quiet ones," the silent ones, organized themselves for the first time in the history of this community in order to have their *voices heard on behalf of their children.*

I can still recall families signing petitions, a congregation praying peacefully before the school board, and children's voices energizing meetings. The goal was to maintain a quality educational program for the children of Steel Town. Yet members of the Steel Town community referred to the bilingual families as "those migrating birds," "jungle savages," and "genetically inferior." A local radio station included discussions about posting a blue "e" to signify support for an English-only agenda; some wanted to charge second-language speakers more money for their purchases if the proprietor determined that the buyer's proficiency in English was inadequate.

It was sad to interview a mother who recalled receiving "whacks on [her] head" for not spelling her name in the anglicized manner, to hear Margarita (a first-grader) whisper that in her school only English is to be spoken, and to hear Josue say how lost he felt ("It's like you have lions in a cage and you put in a little goat"). The families' struggle occurred in the context of what Friere describes as "cultural invasion". "... invaders penetrate the cultural context of another group, in disrespect of the latter's potentialities; they impose their own view of the world upon those they invade and inhibit the creativity of the invaded by curbing their expression."[10]

What Bilingual Families Want

The families with whom I spent time shared with me their hopes and their dreams for future generations. I refer to these families as "Agueybana" families; they are reminiscent of a Puerto Rican native chieftain. I came to admire their wisdom and their resiliency in a community hostile to their linguistic and cultural gifts. They had very specific advice for schools, in particular, which I would like to share with you, because I think it may prove helpful to professionals who advocate on behalf of families.

The families called for a deliberate shift from paradigms of shame to paradigms of compassion. I think this shift needs to take place not only in schools, but in communities and in the nation as a whole. Within this larger *consejo* (piece of advice) urging compassion, there were eight additional items. The families saw a great need to:

1. Implement programs that help to *preserve home languages and cultures*
2. Integrate caring and humanistic approaches
3. Acknowledge that institutions are not the only knowledge brokers, since families have much information to share
4. Encourage "linguistic and cultural integrity"
5. Initiate mentoring relationships
6. Interact and communicate in ways that value the attributes of diverse populations
7. Provide access to quality programs
8. Provide ethical and knowledgeable advice to families

Persons who hold stereotypical notions that certain families do not care about their children's future have not met the families in Steel Town. They have not met the families in Lowell, Massachusetts, nor the families of the Foundation Center for Phenomenological Research in Sacramento, California. When the Foundation Center's early childhood education programs were attacked by bureaucrats recently, families participated in a hunger strike.

My experiences with families have helped me to reflect on the need to implement family-centered practices that help create collaborative and democratic climates in our communities. Collaboration will help to ensure that the needs and voices of culturally and linguistically diverse families are well represented. A collaborative model can assist families with preserving home languages and bicultural identity, strengthening their political voice, and securing equal opportunity for themselves. A democratic climate also values diverse languages and cultures, because in a democratic society, "an individual can be bicultural and still be loyal to American ideals."[11]

The oppressive environment children and families are experiencing, sadly, is "business as usual" in our communities. "This is America!" said a school administrator to me once, meaning that institutional racism prevails in his and in other communities without raising awareness or concern. Many of us will continue to resist being a part of such an oppressive America. Our children learn about a different America, an America that promises democracy, freedom, and equal opportunities.

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From Self to Other: Communication Across Cultures

by Brenda M. Rodriguez

Photo by Marilyn Nolt

Foundations for Practice

It is through necessity that the means of perception are developed. Therefore, increase your necessity.
—Jalaludin Rumi, 13th-century scholar

In today's world, technological advances and increased mobility have placed individuals, communities, and institutions within an intricate weave of languages, vocabularies, and cultures in which the problems of communication and understanding can seem insurmountable and frustrating. Even between people who share a common language and culture, communication can be an elusive goal. Because so much of family support takes place within the context of community, where individuals from various cultures are trying to function effectively together, the need for practitioners to become skilled community liaisons and communications facilitators is increasing.[1]

The approach I suggest to increasing multicultural capacity and enhancing intercultural communication skills involves becoming aware that we all are multicultural beings, and that increasing our capacity to communicate cross-culturally or interculturally is a *process*. Barriers are opportunities to reflect upon our personal cultural assumptions, experiences, and knowledge, and to develop a new perspective. Cultural barriers are not easily eliminated. It takes training, exposure, meaningful interaction, time, and a willingness to learn how to skillfully and credibly respond to barriers.

Most people come to understand well three or four groups in a lifetime at most. Obviously, no family support worker or social service provider can become an expert on all cultural groups and the intra-ethnic diversity that perseveres within groups. An essential element for family support practitioners is the willingness to develop an attitude of openness to cultural variability and to the relativity of one's own culture, values, and experiences. A successful approach lies not in eradicating cultural differences, but in developing one's potential to view these differences as a source of cultural enrichment and personal development—achieving multicultural competence.

In this article, I will briefly explore a definition of culture, discuss the significance of cultural self-awareness for developing multicultural capacity or competence, identify some of the barriers to achieving communication in multicultural and intercultural contexts, describe some possible responses to those barriers and challenges, and explore the value and role of communicative competence in multicultural contexts.

Exploring a Definition of Culture

I like to define culture as the framework that guides and frames life practices: it shapes everything we do. Culture is not genetic. One cannot simply look at or interact superficially with an individual, family, or community and determine the operative cultural frame. Culture is learned and changes over time as a result of interactive internal and external factors. Culture flourishes within a dynamic process, often hiding its deepest elements from those reflecting the culture.

All of us are cultural beings, with culture influencing the development of our beliefs, perspectives, and behavior. According to Anderson and Fenichel, the "cultural framework must be viewed as a set of tendencies of possibilities from which to choose," not a rigidly prescribed set of assumptions.[2] Cultural frameworks are constantly evolving and being reworked, and we are continuously observing and participating in events that shape our individual experience within these frameworks. Thus, although persons of the same cultural background or history may share a readiness to act or think similarly, not all members of a group will behave in the same manner. Behavior is governed by many factors including socioeconomic status, sex, age, length of residence in a locale, geographic location, and others—each of which has an impact on cultural practices as well. As a result, individuals may differ in the degree to which they adhere to a set of cultural patterns.

Some individuals identify strongly with a particular group; others combine practices from several cultural groups. An appreciation and respect for cultural variations, as well as group and individual differences, is crucial for family support practitioners. While our cultural and/or ethnic or "racial"[3] identities play a role in defining who we are as people and how we conduct our lives, multiple dimensions form that identity. Consequently, it is essential that the family support movement present cultural diversity issues in their broader contexts such as religion/spirituality, region and geographic location, ethnicity and/or "race", socioeconomic status, sexual orientation, primary or first language, exceptionality or disability status, gender, nationality, generational status, family status and structure, etc. Other factors play a significant role in defining who we are culturally as well, such as the degree to which we identify with specific groups, the circumstances under which we so identify, and the shared aspects that lead us to identify with those groups, in addition to the multiple social and demographic factors.

The Significance of Self-Awareness

Everyone has a culture, but often individuals are not aware of the behaviors, habits, and customs that are culturally based.[4] As practitioners, becoming aware of our own cultural identity facilitates our capacity to:

1. explore, understand, acknowledge, and value our cultural and social background regarding "race," ethnicity, social class, gender, region, sexual orientation, exceptionality, age, religion/spirituality, language and dialect, etc.;

2. increase our awareness and insight into our own learning processes, strengths, weaknesses, successes, failures, biases, values, goals, and emotions;

3. experience our own cultures in relation to others as they are illuminated during cross- cultural interactions;

4. understand and respond to areas of conflict and tension when we encounter individuals from unfamiliar cultures or experiences, and learn to be more comfortable with being uncomfortable;

5. explore and appreciate thought processes that occur interculturally and may also take on different shapes and meanings for different cultural groups and for individual group members; and

6. understand and respect more deeply the cultural values and beliefs of those with whom we come in contact.

To understand and appreciate fully the diversity between us and the individuals and families with whom we work, we must first understand and appreciate our own culture. Self-awareness is the first step on the journey of cross-cultural competence or multicultural capacity.[5] It begins with an exploration of one's own heritage, encounters, and experiences. Perhaps the most enriching way to gather this information is through the recollections of the oldest family or community members, for oral history provides a wonderful bridge between generations and may lead us to explore and uncover information that has been lost, diminished, or silenced. It may be supplemented by photographs, journals, family albums, or notes and letters of important events.

Issues such as place of origin; time of immigration, relocation, or colonization; reasons for immigration, relocation, or colonization; language(s) spoken; the place of the family's first settlement; and places of geographic relocation and movement in the United States all help to define one's own cultural frame or heritage. Information about one's ancestors as native people; immigrants; and people who were colonized or underwent forced migration, relocation, or enslavement (including their political leanings, jobs, economic and social status, beliefs, religion, and values) helps create a cultural portrait of one's family or community. The changes that subsequent generations have experienced related to economics, gender, ethnicity, politics, religion, society, values, and vocation also contribute to that portrait. Another important factor is how one's cultural group relates to the mainstream culture of the United States, and how it is or has been reflected through history.

According to Hall, "There is not one aspect of human life that is not touched and altered by culture."[6] Although this is true for all people, Anglo-Europeans and some other European Americans who may identify themselves as "white" and who believe that "white" is the dominant or mainstream culture in the United States may have the least awareness of the ways in which their cultures influence their behavior and interactions. Their cultures, customs, and habits have shaped and been acknowledged by themselves and others as shaping the society more than any other culture or group of cultures.

For those who have been able to "melt" into U.S. society's pot and readily self-identify as "white" or part of the mainstream, the result is a sense that they do not have a culture. This process of assimilation sometimes results in ethnocentrism and in a notion of a universal monoculture that often goes unquestioned. The United States has always been culturally and linguistically diverse. For those who were either colonized peoples or involuntary immigrants to the United States, the "melting pot" continues to remain elusive. It also took its toll on the diversity among Anglo- and other European groups; it diminished the distinctiveness of earlier immigrants' roots and de-emphasized their cultural and ethnic identities without noting that the process of joining the mainstream involved adopting or adapting to a new culture.

The second step of cultural self-examination is to examine some of the values, behaviors, beliefs, and customs that are identified with one's own cultural heritage. Since health, counseling, and social support services are not value-free or value-neutral, it is critical

for practitioners to explore the assumptions, beliefs, and expectations within health, education, and social service arenas; biases that may be internalized by providers and practitioners; and the policies and practices in place that have cultural underpinnings which may differ from the values and functioning of communities and families being served.

Examination of culture provides for a more in-depth exploration of the issues that impact specific communities being served and methods for identifying barriers, resources, and strategies for creating more inclusive, culturally relevant, and responsive family support. Cultural self-awareness is the bridge to learning about other cultures. It is not possible to be truly sensitive to and aware of someone else's culture until one is sensitive to one's own culture and to the impact that culture, customs, values, beliefs, language, and behaviors have on family support practice.

Our personal cultural journey attests to the idea that people belong to multiple communities. This new knowledge helps individuals separate the ways of thinking, believing, and behaving that have been assumed to be universal, rigid, and static from those that are based upon cultural beliefs and biases.

Identifying Some Barriers to Cross-Cultural Communication

There are several barriers to accurate communication across cultures. First, there is the obvious barrier of language difference. Inextricably linked to culture, language is much more than learning new sound symbols. Even when a language is familiar to us, barriers may arise as a result of differences in dialect, vocabulary choice, context, and experiences.

Second, nonverbal factors such as gestures, posture, physical distance or proximity, tone of voice, eye contact, facial expressions, and timing are a fundamental part of intercultural interactions, and may change what we communicate to someone who has had less exposure to the nonverbal cues used within our own culture.

Preconceptions and stereotypes held by those in a relationship constitute a third barrier to cross-cultural communication. These overgeneralized beliefs allow us to see or hear pretty much what we expect to see or hear, screening out many contradictory or authentic impressions. These stereotypes, often acquired through minimal exposure and/or inaccurate or inadequate information, tend to become realized through our own "self-fulfilling prophecy" when we encounter another culture. We tend to evaluate the content of communication received from others using approving or disapproving judgments.

We may believe, however subconsciously, "Everyone speaks with an accent except those who talk like me," or "People who live there are lazy." Premature evaluation, personal prejudices, and biases frequently interfere with our ability to accept and understand others' points of view and the reality of their experience and may result in relationships that deteriorate, and in providing support to families and communities in ways that are less than effective. These results also are caused by another barrier that impacts family support, which involves the different notions, expectations, and experiences related to a "helping" relationship.

Because the family support movement is committed to acknowledging and responding to cultural diversity, its eagerness to learn about others as quickly as possible often encourages a belief that individuals and families can be neatly categorized and assigned particular cultural/ethnic/"racial" characteristics. These assigned characteristics are often overgeneralizations about groups of people (e.g., all Mexican Americans practice Catholicism, and all African Americans use or understand "ebonics" or Black dialect). We must remember that there is tremendous intragroup diversity and complexity.

Additionally, it is important to recognize some potential negative consequences of overemphasizing ethnicity or "race" in family support contexts. Overly strict adherence to a particular way of doing things under the supposition that it is congruent with the ethnic or cultural values of a group with which one strongly identifies can lead one to resist change, thereby impeding development and growth. Values that have been functional in another place and time often become dysfunctional or challenging when translated into contemporary expectations within the contexts of the mainstream U.S. or a specific agency or program. Ethnocentrism, clannishness, prejudice, racism, fear, and distrust of outsiders can prevent cooperation and meaningful interaction, reinforce exclusion, and deepen intra-group and intergroup conflicts. Other influences such as socioeconomic status, geographic location, and immigration status impact how an individual or family may culturally self-identify.

Ways to Decrease Multicultural Communication Barriers in Family Support Contexts

"The illusion regarding communication is that it has been achieved."
—Unknown

Decreasing the Language Barrier

- Learn the language primarily spoken and utilized by families within a community; become familiar with differences across dialect styles. However, keep in mind that one who is able to speak in more than one language may not be able to easily translate or interpret from one language to another.

- Find someone who can speak the language and has familiarity with the culture and community (who has bilingual *and* bicultural skills), and provide that person with support, guidance, and information as they serve as liaison between individuals, cultures, and communities.

- Ask for clarification if you are not sure what was said or conveyed.

Decreasing the Nonverbal Communication Barrier

- Do not assume you understand nonverbal communication unless you are familiar with the culture and/or have had meaningful interaction and experience (over time) with participants.

- If the nonverbal communication is confusing or insulting in your culture or personal framework, do not take it personally. Express your confusion and request clarification.

- Develop an awareness of your own nonverbal and verbal communication styles that may be confusing, insulting, or easily misinterpreted or misunderstood in other cultures or contexts. Explain and clarify your intentions if necessary.

Avoiding Stereotypes

- Make every effort to heighten your awareness of your own preconceptions and stereotypes of other cultures and groups.

What Isn't Cultural Competence?

Because the notion of a pluralistic society and world is confronting us so quickly and so tangibly, many are converging to classes, in-services, and special programs to learn all there is to know about "other cultures." There is a tendency to approach culture learning and related issues with the notion that in a few sessions, you can achieve cross-cultural "competence" or knowledge. Being culturally competent or aware does not mean knowing everything about every culture. It is, instead, respect for difference, eagerness to learn, and a willingness to accept that there are many ways of viewing the world.

In the workshops and training I facilitate, I am continually reminding and cautioning participants against overgeneralizing or characterizing cultural groups in a rigid, unidimensional, and static way. Culture is not:

- **mere artifacts or materials used by people;**
- **a laundry list of behaviors, values, and facts;**
- **the pseudo-biological or pseudo-scientific trait of "race";**
- **the ideal and romantic heritage or experience of a people as seen through music, myths, dance, holidays, and folklore;**
- **stereotypic depictions of groups as seen in television, movies, newspapers, and other media;**
- **objects to be bought, sold, and distributed;**
- **generalized explanations about the behavior, emotions, or values of groups of people sometimes applied haphazardly to individuals; or**
- **higher class status derived from a knowledge of arts, manners, and literature valued by the dominant society.**

Consequently, cultural competence or awareness is not becoming a member of another culture by a superficial, wholesale adoption of elements, such as customs, language, dress or behavior. Such shallow identification could be "manipulative and patronizing."[1] Abandoning one's own cultural identity and substituting another is not a form of respect, but rather a statement that culture can be easily shed. Culture encompasses values, attitudes, and beliefs, as well as customs and behaviors. While the latter can be readily adopted, the former require deeper and more fundamental awareness and changes. Additionally, cultural competence or awareness recognizes that individuals cannot be categorized into totally discrete groups and that much variability within cultural groups exists. Cultural identification is a complex matrix of intertwining cultural influences that frames individuals' identities and values and influences their choices and behavior in continually evolving and dynamic ways.

Note

[1]GREEN, J.W. (1982). *Cultural awareness in human services.* (Englewood Cliffs, N.J.: Prentice Hall) p. 52.

- With this awareness, reinterpret the behavior, needs, and values of individuals, families, or communities that reflect diverse experiences, cultures, and perspectives from their point of view.
- Be willing to test, adapt, and change your perceptions to fit your new knowledge and experiences, and use this to develop your capacity to be responsive.
- Do not be afraid to ask questions or to be respectfully inquisitive.

Alternative Expectations of "Helping"

- Explore how individuals, families, and communities view counseling or "helping," family support, and assistance. Individuals may be unfamiliar with or suspicious about concepts of family support that are Anglo/Western and middle-class, the bureaucratic notions of "assistance" and "intervention," and ideas and practices related to counseling or "helping."
- Strive to understand and respect the fact that individuals may obtain assistance or help via informal or alternative channels (e.g., family members; spiritual healers; the church, mosque, or temple; elders; informal meeting places)
- Strive to become a liaison among those avenues from which individuals, families, and communities obtain "help," positive affirmation, and sustenance.

Decreasing the Evaluation Barrier

- Recognize your assumptions about a particular context or relationship.
- Try to maintain open-mindedness and objectivity.
- Recognize that *you* cannot compel change on the part of an individual, family, or community. Transformation or change is a process and may occur as a result of complex internal and external factors.
- Avoid using your own cultural values or beliefs as a standard by which to judge individuals, families, or communities until you have come to know and understand their cultural values, experiences, and perspectives.
- Strive to strengthen and enhance the multicultural capacity that already exists within you.

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In general, communication effectiveness is enhanced when the practitioner's communication conveys his or her awareness and appreciation of an individual's or family's personal and cultural background. Ethnicity, "race," and other cultural diversity issues remain a vital force in the United States. They are major features of group identification and major determinants of our family and community patterns and belief systems. Gradually, we have begun moving toward a more complex view of ourselves, which allows us to consider group differences and other complex issues within the whole. For family support practitioners, this means shifting our thinking to consider how the cultural system of our programs interfaces with the cultural framework of individuals and families who may share common histories, experiences, traditions, languages, and world views that differ from what is presented as "mainstream" or the norm.

Understanding the factors that influence how cultural patterns surface in individuals, families, and communities requires obtaining at least the following information for each individual or family:

1. Language(s)/dialect(s) spoken in the home or with other family members

2. Language(s)/dialect(s) spoken in the community

3. Standard language expected/spoken by family support staff; this may limit access to support for individuals and families.

4. Country or other region of origin (e.g., urban or rural area, state, etc.)

5. Categories of "race," ethnicity, family structure, sexual orientation, disability status, or religion that may be ascribed by institutional norms or criteria, or by a practitioner's personal frame (these may differ from an individual's or family's sense of or claim to identity or multiple group membership or association)

6. History of migration to the United States and/or movement within the United States

7. Location and type of residence (e.g., single family home, apartment, shelter, migrant/transitory worker housing, motel, car, relative's residence, etc.; neighborhood, rural, urban, etc.)

8. History of recurrent migration or movement to locations other than the United States mainland (e.g., Puerto Rico, Haiti, Mexico, Poland, etc.)

9. Family structure and who is considered "family"

10. Family roles and responsibilities

11. Socioeconomic status, educational achievement, current potential for economic mobility

12. Status of individual, family, or group in relation to the majority population in the area and community

13. Generational status or immigrant status (e.g., first generation Hmong, second generation Korean-American, third generation Mexican-American; visa or residency status)

14. Multiple group membership and identification (e.g., religious affiliation, mixed heritage, cultural exposure, bilingual capacity, etc.)

15. Additional information regarded as important by program participants and practitioners that will facilitate a family support approach

It may be challenging and difficult for us to remain open to the complexity of cultural diversity and wide range of possibilities that it creates. Ambiguity and difference often are threatening or create discomfort. With little support or guidance when faced with the challenges and opportunities associated with developing cultural competence, we may close down emotionally—and even intellectually. The best insurance against rigidity and feeling overwhelmed may be to understand that we are limited by our life experience and what we have been exposed to, our formal and informal education, and the relativity of our own ethnic and cultural framework and personal experiences. This insight is something for which family support practitioners should strive.

Examining our individual cultural and philosophical frameworks as well as stepping outside of our belief systems present specific difficulties for the family support movement and its practitioners. When we value the importance of creating inclusive communities and invite the meaningful dialogue and participation of individuals, families, and communities different from ourselves, we are compelled to question and transform our practices and approaches. It is no wonder we feel overwhelmed. Transcending our reluctance and fear provides us with an opportunity to broaden our perspectives, strengthen our relationships, and share in the larger landscape of human experience. In this way we can begin the process of acknowledging the commonalities across our differences.

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Notes

[1] DUNST, C. (1995) *Key characteristics and features of community-based family support programs.* (Chicago, Ill.: Family Resource Coalition) 52.

[2] ANDERSON, P. P., & FENICHEL, E. S. (1989) *Serving culturally diverse families of infants and toddlers with disabilities.* (Washington, D.C.: National Center for Clinical Infant Programs) 8.

[3] "Race" is a concept that was invented to divide humankind into broad or narrow categories according to perceived physical characteristics (such as size and shape of head, eyes, ears, lips, and nose, and color of skin, hair, and eyes) in order to construct differences that Europeans and European Americans thought important. Categorization into a "race" other than "white" has led groups of people to be discriminated against, oppressed, and presented as inferior.

[4] ATHEN, G. (1988). *American ways—A guide for foreigners in the United States.* (Yarmouth, Maine: Intercultural Press).

[5] TIEDT, P. L. & TIEDT, I. M. (1990) *Multicultural teaching—A handbook of activities, information, and resources,* 3rd edition. (Boston: Allyn & Bacon).

[6] HALL, E. T. (1976) *Beyond culture.* (Garden City, N.Y.: Anchor Books) 16–17.

The Challenges of Multiculturalism in One Head Start Program

by Barbara Becker, Director
Hull House Uptown Head Start
Chicago, Illinois

I work in a Head Start program that serves 102 families; among them, 10 languages are spoken. The staff is also culturally diverse.

The Head Start curriculum is guided by principles of multiculturalism. Effective Head Start programming requires understanding, respect, and responsiveness to the cultures of all people, but particularly to those of enrolled children and families. We are learning that true cultural enrichment requires synergistic relationships. Culturally relevant and diverse programming requires a growing sense of interdependence among people; it requires us to take a step beyond "this is yours" and "this is mine."

Drawing on and thinking about my own cultural influences has been an important part of my work with the families and staff in our program. I view myself as an ally to people of other cultures. My grandparents, immigrants to the U.S., did not learn to read and write English. I see how that affected them and my parents, and it helps me understand the immigrant families in my program. I was raised Jewish, and that has taught me a lot about making this world a better place. The civil rights movement and Dr. Martin Luther King, Jr., influenced me very heavily, and threw my life onto a whole different trajectory than many of the other white people I grew up with. I try to identify with others through my own cultural influences.

While our Head Start is a little United Nations, at times we are quite disconnected and disunited. Sometimes an event or activity will challenge or conflict with a core value held by some staff or families. For example, when families in our program visited another program's Mexican "Day of the Dead" observance, which is much different from the sugar-dazed Halloween celebration, the cultural values of some led them to view it as "devil worship" or disrespect for the departed. Kwanzaa, an African American celebration that falls near Christmas, has been rejected by some Christians because it is not Christian; by some Africans because it is not African; and by others because they don't have a history with the celebration and don't find it meaningful.

And there are successes, times when all of us participate and contribute. When families organized a celebration of Posada, a Mexican-American reenactment of the Christmas story, it was a very special time, a chance for about 40 children of many different cultures and their families to participate completely. Both those who spoke Spanish and those who did not sang the traditional songs, with help from bilingual teachers and staff. The adults and children claimed the event as theirs, regardless of their cultural backgrounds.

We have found that it is important to create opportunities for frank discussion among parent participants and staff. In parent and staff meetings and in our day-to-day communication, everyone needs to feel that it is safe to talk. Because many parents have been in service settings in which they were not treated as equals with valuable opinions, sometimes it may take them a long time to feel free to express themselves—maybe until they have a second or third child whom they bring into the program.

I am aware that people of different cultures interpret communication through different "filters," and that what I think I'm saying and what someone else is understanding may be different. It is important to have patience with the relationship and encourage families and staff to talk about miscommunication when it occurs.

In my experience, culture often shows itself as an attitude or action that distinguishes "the right way" from "the wrong way." When families and staff at our Head Start program discussed fasting, which takes place during sacred times in many cultures, we discovered that each culture followed different rules and carried out the practice differently. The challenge for us was to avoid judging who was doing it "right" and who was doing it "wrong," but to acknowledge that for all of us, in our wide variety of cultures, fasting was consistently viewed as an opportunity to meditate and reflect. When you strip the details of cultural practices away, there are very basic commonalities. That's the juggling act of multicultural practice—finding commonalities as a basis for understanding while preserving and honoring our differences.

Families—especially those with more intact or growing family structures—and staff can model stability, in maintaining their cultural practices and in other aspects of life, for others. At Hull House Uptown Head Start, we would like to be a place in which families can preserve and value, yet share, their cultures. When families and staff do share aspects of their cultures, we must appreciate that.

We must undergo deep soul-searching and discard stereotypes, while at the same time affirming core cultural beliefs. Families who are supported in their cultural identity are better able to foster it in their children. The task of each of us is not to "fit in," but to use cultural context as a vehicle to reach our full potential.

Building programs that are truly multicultural takes a great deal of courage, risk taking, training, leadership, and resources—and a lot of communication. For me, courage is most important; facts and information are useless if we are too fearful to have our hearts touched by the very different life experiences and values of others.

An Afro-Centric Perspective on Developing Cultural Identity

by Maisha Sullivan

Photo by Marilyn Nolt

Serudj:
To raise up and to restore that which is in ruin
To repair that which is damaged
To rejoin that which is severed
To replenish that which is lacking
To strengthen that which is weakened
To set right that which is wrong
To make flourish that which is insecure and undeveloped[1]

Sankofa:
A practice of historical recovery; to reach back and bring forward[2]

These are African value concepts. They speak to a people's obligation to save their culture—to rescue, restore, and reconstruct their own history and humanity. They reinforce the importance of cultural advocacy.

As a cultural practitioner, I strive always to center myself in my own culture. In this article, I turn to my culture and to my ancestors as resources in discussing the challenges presented to me and the developmental challenges that social service programs and practitioners who work with families of color must address.

The philosophical base for this article is Kawaida, an African-centered philosophy of culture, social change, and life that is rooted in tradition, reason, and self-conscious practice, which was conceived of by Maulana Karenga.[3] The issues and practices of elevating affirmative aspects of African and African American cultures are offered here as transferable to other cultures. Good cultural practices are rooted in a commitment to and interest in a people.

Recognizing Authentic Culture

Developing and exploring the authenticity of cultural characteristics is an important aspect of good family support practice. Such exploration reduces the belief in and use of stereotypes and facilitates cultural diversity. A person must constantly study to acquire an awareness of different manifestations of a particular culture. Adaptations to traditional culture that are generated by the members of the culture, are critically selective, and are not externally imposed should be valued and respected as authentic. Culture is not stagnant; people build on what their ancestors gave them.

Categorization of different forms of culture may be helpful in learning about authenticity. Maulana Karenga defines three such categories:

1. Communal culture: From the people, but may not be self-conscious or collective, and often consists of pragmatic ways to deal with daily life

2. Popular culture: Commodification of communal culture; usually a deformed and distorted version of communal culture. Originally created by the people, but becomes market driven.

3. National culture: Self-conscious practices that are worthy of emulation and protection. They represent the best of a particular culture and of humanity by facilitating the flourishing and development of humans.[4]

African cultures share profound spiritual and ethical orientation; high levels of respect for tradition, elders, all humans, and the environment; and rootedness in community and communitarian values.

Practitioners and families can develop their knowledge of authentic components of a culture by studying literature that affirms the culture. Popular and community-based newspapers, magazines, and

other culturally generated publications can be good sources of information. These are often marginalized, but offer authentic aspects of the culture by focusing on the daily lives and aspirations of people.

The works of scholars and activist who are members of the culture and are centered in its history and reality and in the potential of its people should be read and referred to. Recommended for African-centered cultural analysis are: Maulana Karenga[5], Naim Akbar, Linda James Meyers, Wade Nobles, Makungu Akinyela, Thad Mathis, Joseph Baldwin, Leon Chestang, Daudi Azibo, Jerome Schiele, Amos Wilson, Frances Brisbane, Molefi Asante, and Asa Hilliard. Their works expand the knowledge base of family support, which has relied on the same mainstream scholars for years. Many of the acknowledged mainstream scholars and practitioners offer very little new information and challenges, and their writings are often exercises in admiration of each others' works.

The works of the recommended scholars can be found in a number of journals[6], and their books can be found in African American bookstores. They provide a shift from and subversion of the dominant Eurocentric paradigm. Their works have clear practical implications for how to assist with the capacity building of African Americans and other marginalized peoples. A commitment to life-long study and to the search for and utilization of the authentic is required. This commitment means more than just a few readings, seminars, workshops, and conferences on cultural competency and diversity.

Generational linkage is also a practice that assists the development of authentic cultural practices. Programs can assist families in forming links with elders, who are the cultural keepers, and can involve elders in programming in meaningful ways. Those involved in the program must truly believe that the elders have something to offer in assessing and meeting the needs and realizing the aspirations of the program, the families, and the community. It is culturally destructive to view elders as useless and to warehouse them in nursing homes and senior citizen complexes. The policies of many of these homes further detach the elders from their families, destroying cultural linkages and continuity, including preventing overnight visits from children and other family members. Elders in the African American community have been a major provider of childcare for over-burdened parents. They have provided much-needed respite for the parents and moral and cultural grounding for children. Good practice involves keeping the elders in the community and creating meaningful roles for them in our family support programs.

Adaptations to traditional culture that are generated by the members of the culture, are critically selective, and are not externally imposed should be valued and respected as authentic.

Advocating to Keep Cultures Alive

Culture is routinely devalued and encouraged to decay in insidious ways—even by those who think they are helping keep culture alive. Maulana Karenga refers to this as the "calcification of culture."[7] Culturally destructive practices do not engage in daily dialog with the culture. Sometimes programs use the culture as a spectacle and marginalize it by making it a part of only some activities. Often they use culture only as a reference, rather than as a resource. Far too many programs only utilize the creative production aspects of a culture such as the music and dance, and encourage the wearing of national clothing only for special events.

Vigilant and consistent advocacy is needed by practitioners in not allowing program participants to be viewed and used in this way. Programs must treat participants as living sources of their culture. Those involved in the family support field must challenge programs and program components that do not engage the cultures of participants daily in all aspects of program operations through, for example, culturally specific methods of governance, decision making, and learning. This challenge can be issued by asking and expecting programs to have culturally generated answers and solutions to the issues, concerns, and challenges that their families, the agency, and the community face. Those in the family support field also need to advocate for continued and sustained cross-cultural professional training for practitioners.

Affirming Culture Through Specific Practices

Family support programs offer a context that is very conducive to the research and implementation of practices that affirm culture and strengthen the cultural identity of community members. Programs can institutionalize culturally specific activities that acknowledge the significance of life changes such as births, naming, marriage, birthdays, passage into adulthood, graduation, elderhood, and funerals. Libations can be poured to honor ancestors at ceremonies marking all of these changes. Programs can encourage the daily use of traditional proverbs as value lessons; families can relate them to contemporary events, issues, and concerns.

Naming can be made into a conscious act that encourages those choosing the name to nurture the strengths of the people they have named. Program workers can ask expectant parents what positive characteristics they want to cultivate in their children, and help them find traditional names that capture and affirm these attributes. The program's resource library can make books of African names available to expectant parents. These practices affirm the African cultural practice of purposeful and communal naming of our children. Family and friends can be asked to select a traditional name for an adult who does not have one, based on his or her good attributes and aspirations.

Culturally specific practices elevate the culture and move programs past their usual tertiary acknowledgment of culture only on holidays. They provide more

concrete tools to our families than do a few pieces of art work or posters hanging on agency walls. Program staff need to have the information, materials, and resources needed for these activities readily available and should incorporate them as often as possible into their work with families, to reinforce and reaffirm their importance and beauty. These activities support and facilitate affirmation that others' cultures and histories are equally rich and sacred.

Encouraging Critical Thinking

Strengthening critical thinking skills as a part of life skills development is necessary when working with families and communities of color. It enhances cultural identity by bringing marginalized people to the center of their view of the world. Developing critical thinking involves analysis of human activities and their impact on people with respect to race, class, gender, and membership in other groups.

My utilization of current events and policy analysis has generated some of the most enlightened pictures of families in my program. In family support groups, I have facilitated critical discussions on: the media's portrayal of people of color, welfare reform, school vouchers, rap music, movies, affirmative action, the O. J. Simpson trial, the Million Man March, and the Day of Absence. I always ask: Whose interest does the dominant view serve? And what does culture have to do with this issue? I ask families to compare and contrast how other cultures may view the same issues and discuss why they may view them that way. During these discussions, practitioners must be mindful of the use of words, categories, and definitions, for to quote Maulana Karenga, "Categories are not simply descriptions of reality; when embraced and acted on, they become forms of reality."[8] A process and an environment that encourage honest dialogue which is self-critical and self-corrective of internal contradictions and external imposition are key to developing critical thinking and cultural identity. The practitioner can sense the family's level of cultural identity, their level of participation in and commitment to their own culture and the mainstream dominant culture, and their levels of self-hatred and racial and cultural depreciation.

These discussions inform my practice and service plans for individual families. Some families need more "cultural inoculations" to make them immune to cultural assimilation. Engaging families on these issues is outside of the current scope of most family support programs. Programs often focus on survival and family development, and do not encourage social critique and system analysis or view it as a family skill.

Good practices that support cultural identity development must be rooted in authenticity, generational linkage, advocacy, affirmation, critical thinking, and ethical and spiritual grounding.

Ethical and Spiritual Grounding

The African concepts and practices of Maat and the Nguzo Saba are ethical and spiritual tools that emphasize morals and concern for the vulnerable. Maat consists of Truth, Justice, Propriety, Harmony, Balance, Reciprocity, and Order. The Nguzo Saba (The Seven Principles) are Unity, Self-Determination, Cooperative Economics, Collective Work and Responsibility, Purpose, Creativity, and Faith. Family support practitioners grounded in these principles inevitably are more effective with the families and communities they serve. They will be better able to practice in culturally affirmative ways.

Good practices that support cultural identity development must be rooted in authenticity, generational linkage, advocacy, affirmation, critical thinking, and ethical and spiritual grounding. These practices challenge the status quo and acknowledge that the mainstream is a polluted stream that is toxic to non-European cultures, and that the United States, in particular, is an unfinished multi-cultural project. I hope that this humble sharing represents the beauty of African culture, and brings honor to our ancestors, the Elders, and my family, organization, program, and community. May they all be pleased.

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Notes

[1] Concept of ancient Egyptian people, from Karenga, M. *Husia: Translation of the sacred text*. (Los Angeles: Sankore Press).

[2] Concept of the Akan people of Ghana.

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[4] KARENGA, M. (1994) *Institute of Pan-African Studies* seminar, Los Angeles, summer.

[5] In addition to the other works listed are:
KARENGA, M. (1993) *Introduction to Black studies*. (Los Angeles: University of Sankore Press)
KARENGA, M. (1986) "Social ethics and the Black family: An alternative analysis." *The Black Scholar 17* (5) October.

[6] *The Journal of Black Studies, Western Journal of Black Studies, Journal of Black Psychology, Black Caucus: Journal of the National Association of Black Social Workers*.

[7] KARENGA, M. (1980) "Society, culture, and the problem of self-consciousness: A Kawaida analysis" In *Philosophy born of struggle: Anthology of Afro-American philosophy from 1918*. Leonard Harris, Ed. (Dubuque, Iowa: Kendall/Hunt Publishing Co.).

[8] KARENGA, M. (1994) *Institute of Pan-African Studies* seminar, Los Angeles, summer.

Difference and Power in Therapeutic Practice

by Elaine Pinderhughes

The sense of power or mastery that is critical to an individual's mental health exists for practitioners and clients alike. For practitioners as well as for their clients, that sense of power in a helping setting can affect or be affected by the presence or absence of power in other areas of life and/or other levels of functioning. At the same time, practitioners are also automatically endowed with the power that is implicit in the helper role: the power to assess and intervene, to teach and treat, to give or withhold resources. Thus, it is important that practitioners understand how the power embodied in their helping role can be and too often has been exploited to meet their own needs for personal power and esteem.[1]

The Power to Help

In the helping encounter where client and practitioner are from different backgrounds and statuses, this power may be compounded by the aggrandizement that is associated with the practitioner's social/cultural group identity and status. The temptation to exploit this power dynamic in the treatment of clients from less valued social/cultural groups, to use this power in order to satisfy personal need, is far greater than one may think.

In the helping encounter, practitioners who are members of dominant, beneficiary groups (such as those who are white, male, or middle- or upper-class) can exploit their aggrandized social/cultural group status, relieving anxiety and reducing tension for themselves, whenever they work with persons from victim groups (such as people of color and those who are poor, female). Exploitation occurs whenever the practitioner engages in behavior that perpetuates clients' perceptions of him or her as the powerful expert and of themselves as less valued, incompetent, and powerless.

Intervention is only truly successful when these perceptions are changed and practitioners and program participants learn to see themselves as peers who are competent persons of value. Practitioners who are ethnic people of color, gay, or members of other oppressed social groups are also vulnerable to exploiting clients if they cannot manage their negative responses to their own membership in a victim group effectively. They are, indeed, vulnerable to using the power embodied in their helping role to compensate for the powerlessness they may experience in their social role.

Difference and Hierarchy

A sense of discomfort, and indeed a state of anxiety, concerning the experience of being different exists for nearly everyone. People's experiences with feeling different usually are negative. When we speak of something being different from something else there is usually an implied meaning that one is "better" or "worse" than the other. One possible explanation lies in the fact that the most frequently mentioned sources of these negative experiences are related to cultural and social identity: religion, race, ethnicity, color, and gender.

When, as a result of these dynamics, people react defensively to others who appear different to them, they will tend to spend considerable energy protecting themselves against the discomfort that is mobilized, and thus they remain unable to hear one another, resorting to the use of distance in some way. Such defensive, protective behavior, which occurs for practitioners as well as clients, can seriously interfere with the effectiveness of their work together.

Practitioners must understand the significance of these issues for the problems their clients bring. Since a predominantly positive sense of cultural/social identity and meaning is critical for everyone, helping their clients to achieve clarity and a positive sense of value in relation to their cultural/social identity can be part of the work that must be done.

Practitioners must also understand these issues in relation to themselves. When they are uncomfortable, confused, or negative about their own cultural identity and what it means, they may find themselves unable to "tune into" their clients and interact with them in ways that promote the comfortable relationships and respectful stances that are mandatory for effective work.

An understanding by practitioners of the dynamics of power in the helping process and the influence of those dynamics upon their own social/cultural identity helps guard against exploitation of clients. Being able to examine these liabilities and to understand the purpose of the behaviors that creates them facilitates the ability to control them. To understand the dynamics of power in relation to race, ethnicity, gender, and class identity, practitioners need to give special attention to self-examination in these areas. Elsewhere I have described a training program that facilitates such self-understanding.[2]

Looking Inside First

Self-examination requires practitioners to consider how society's projection of negative characteristics upon certain groups, such as ethnic minorities, may provide a sense of competence, stability, and lack of confusion for them while it reinforces anxiety and greater confusion for members of these groups who are their clients. They then must also ask themselves whether and under what circumstances they, as helpers working with persons from victim groups, do in fact receive gratification from their helper role. They also must acknowledge the fact that they do occupy a role of

double power with respect to their clients and examine how this may threaten the helping process. They must question whether their goals and strategies are influenced by a personal need for the gratification that is available to them because of their powerful professional and societal roles, face their liability to exploit those roles, and take responsibility for managing any behaviors that result.

If practitioners are uncomfortable about not being in control, *if* they look for aggrandizement in relation to their social/cultural identity or to any other powerful societal role, the ability to relinquish control and to practice the reciprocity, mutuality, and self-disclosure that are so necessary for effectiveness with many clients will be compromised.

Intervention: Empowerment

Understanding Context

Intervention must be multilevel, focusing concurrently upon strengthening individual functioning, improving family structure and process, reinforcing external support, and making available needed resources by altering external entrapping forces. Empowering intervention with families concentrates on the systematic contradictions faced by disempowered groups, the adaptations they evolve, the forces that have entrapped them; and changing, when possible, the source of their entrapment.

Many individuals expend considerable effort to ward off the projections of the powerful: that they are, for example, incompetent, dumb, crazy, a stud, sexual, or dependent. Others react to their powerless roles by assuming these projections: by identifying with the aggressor (which leads to feeling of self-hatred); being guarded (seen by the powerful as being paranoid); striking out (seen by the powerful as being violent); and/or being oppositional, passive-aggressive, or autonomous (seen by the powerful as being stubborn). Some use dependency as a strategy for getting a sense of power, since it enables one to be close to persons who do have power. Many assume these behaviors in an exaggerated way that allows them to feel that they are initiators rather than victims.[3] Turning around the meaning of negative attributions is another survival strategy. This is illustrated in the African-American use of the adjective "bad" to mean good and the word "nigger" as a term of affection and warmth. Draper notes that such maneuvers intend to transform impotence into an active force.[4] If one lacks the power to stop being identified by a negative label, one can empower oneself by changing its meaning. Understood in this context, all of the behaviors described above are adaptive.

Exploitation occurs whenever the practitioner engages in behavior that perpetuates clients' perceptions of him or her as the powerful expert and of themselves as less valued, incompetent, and powerless.

Practitioners should use strategies that help clients to connect their specific problems or needs with social context and conditions such as poverty, racism, and destructive helping systems that reinforce their powerless roles.[5] Such strategies reinforce clients' strengths and encourage clients to recognize how they have sought to deal with the contradictions and powerlessness inherent in their societal position. They come to understand that the actions they have taken represent their natural wish to be strong and to cope. Thus their struggle to survive and manage the systemic confusion and contradiction in which they are trapped are validated, as are the adaptability, creativity, resourcefulness, and resilience that the use of these coping mechanisms represents.

Supporting or Changing Individual and Family Behaviors

Many empowerment strategies seek to change behavior and cognitive sets by using educative strategies, which lower the power differential in the helper-client relationship. Another strategy is relabelling. Using this strategy, practitioners help program participants identify adaptive behaviors that they have used to obtain a sense of power but which appear dysfunctional or extreme; they then identify these behaviors as illustrations of the participant's determination to survive and to be strong, giving credit to his or her struggle and viewing his or her responses as symbolic of commitment and a sense of responsibility.

Relabelling effectively deals with ambivalence and contradiction, conditions that are experienced by ethnic minorities of color and gays as a result of their contradictory, ambivalent position in the social system. Thus, a mother who struggles alone to compensate for the absence of support systems and becomes controlling, overly central, and smothering in relating to her children can learn that her heroic efforts to organize the family are exhausting her.

Garcia-Preto recommends telling a Puerto Rican wife who is tolerating abuse that she is trying too hard to show her love.[6] A Mexican woman who blames herself and feels like a failure when she cannot alter her paradoxical situation can be told that she is demonstrating how responsible she feels for everyone's happiness and how much she is trying to be loyal to her cultural role.[7] A father who is seen as too authoritative and controlling can learn that his heroic efforts to provide for and protect his family in the face of disorganizing, often racist "support systems" have been necessary, but are interfering with his children's growth. An underfunctioning father can be told that backing off may be his way of reducing stress, keeping peace, avoiding conflict, and/or providing protection for family members, but that his family needs him.

When this approach is taken, it is easy to show clients that neither they nor their adaptive mechanisms are at fault; but the degree to which they apply these mechanisms has become exaggerated. Hard work, toughness, struggle, strength, persistence, determination, adaptability, creativity, and caution, for example, may have been critical strategies for surviving

and managing their powerless societal position. Under stress, however adaptability can easily slip into inconsistency, toughness and strength into abuse, persistence into stubbornness, caution into immobilization, and hard work into driven dedication.[8] Intervention strategies thus will not focus on eliminating these behaviors, which have been useful for the family's or family member's survival, but on moderating their rigid, exclusive, or exaggerating aspects.

Intervention strategies also should focus on adding new behaviors to clients' repertoire of effective responses. They will learn that some behaviors, though adaptive, can exact a high price. For example, the need to always be in control and strike back can keep power struggles going, reinforcing a situation in which one has to win, be in charge, and/or put others down, even through violence. None of these behaviors supports the reciprocal, collaborative behavior that is needed for harmonious relationships.

Exaggerated autonomy facilitates going it alone when there appears to be no help, but it can mean that one will not use help *even when it is available*. Clients can learn new behaviors that are proactive, not reactive—new ways to be strong that involve shared power. They can be helped to see that setting and pursuing one's own goals; being assertive in ways that do not reinforce power relationships, put others down, or keep power struggles going; negotiating and compromising; and making the decision not to escalate a battle, but to allow oneself to be vulnerable are ways of taking initiative and also showing strength. Functioning in a proactive way and developing the tolerance for vulnerability can be an important capacity to acquire for persons whose survival strategies have pushed them to become rigidly defensive and power oriented. This is of course best demonstrated when the helping relationship itself models collaboration and client participation.

Empowerment strategies that are based on an understanding of systems and power also focus on efforts to change not just the consequences of people's powerless positions, but also the causes. Families and communities are falling apart under the forces of urbanization, industrialization, new technology, and economic imperatives. If persons from powerless groups do not have nourishing, protective connections to extended family, community, and the "outside world," they are at the mercy of those entrapping, paralyzing forces. Thus an intervention goal would link them up with these supports, which include church, fraternal, and/or social groups. Blanchard suggests strategies for Indian women that allows them to help their people and work for their group, which not only promotes the group cohesion necessary for dealing with oppression, but also provides an acceptable response to her sense of powerlessness by increasing self-esteem and sense of efficacy.[9]

Empowerment strategies focus on enabling clients to change the larger social systems with which they interact.

More recent conceptualizations of empowerment strategies focus on enabling clients to change the larger social systems with which they interact—a most welcome development. These models focus on the creation of networks, and on changing old organizational structures, community structures, and legal structures through education and political action.

Helper Training

Practitioners' readiness to empower clients, to value clients' strengths, to take a one-down position when appropriate, to respect cultural meaning different from their own that is embraced by clients whose cultural group occupies a denigrated status, and to engineer larger system change depends heavily up on practitioners' capacity to manage their own need for power. When practitioners acquire the necessary training to guard against exploitation of their clinical role with clients[10], they learn to be flexible in their thinking and behavior, and thus to adapt their work styles to the values, expectations, and preferences of their diverse client population. They do this while choosing from a variety of strategies that are useful for the range of cultural groups, social classes, levels of education, and levels of acculturation that exist among those they serve. They can work effectively despite the fact that the values underlying their clients' behavior may be vastly different from their own and from those that have been the foundation for traditional assessment and treatment approaches.

When practitioners are properly trained, the extra steps and additional energy that are required for them to exercise this flexibility do not overwhelm them, nor do they lead them to distort their clients' experiences. These practitioners do not devalue the acts of engaging the client and intervening appropriately, and do not abandon the effort. When able to manage their own need for power and responses to difference, practitioners are less threatened by the importance of employing less hierarchical, more power- sharing strategies. They engage easily in the mutuality, reciprocity, and capacity for openness and self-disclosure that are expected by clients who belong to certain cultural groups.

Power-sharing modes are necessary for work with any client whose experiences with personal and social powerlessness have been such that they cannot be engaged. These clients cannot begin to change their collusion with their own victimization without strategies that give them a sense of power.

Training in new empowerment models will help practitioners become comfortable with strategies marked by collaboration and equal participation with clients.[11] They will be prepared to dialogue with clients as peers, and to engage in "power with" rather than "power over" behaviors. The flexibility which they develop will not, however, prevent appropriate use of authority when necessary.

Because practitioners who are well

trained have their negative responses to difference from others under firm control, they refuse to manage their personal discomfort related to difference or power by viewing their clients' adaptations as an automatic sign of pathology or incompetence. They are on guard against stereotypes that act as anxiety- reducing mechanisms for themselves and which associate weakness, dependency, dysfunction, and pathology with groups to which their clients belong.

Because they are free to see their culturally and socially different clients in the context of their environments, practitioners with the needed self-knowledge can see that lack of knowledge or resources and entrapment in social position are factors in the etiology of the problem and in the solutions that are sought. They are thus readier to focus on clients' strengths and believe in their clients' potential.

Hopps, Pinderhughes, and Shankar, who conducted research on clients trapped in transgenerational poverty, found that high expectations of clients are a major factor in successful outcome, and that the best predictor of successful client change is flexible and caring practitioners who expose clients to high goals and expect them to rise to the occasion.[12] When well-prepared, practitioners can exercise belief in their clients' potential power and the readiness to mobilize it. They can also reinforce clients' perceptions of themselves as peers, as collaborators, and as persons of value who belong to a group that has value and who are capable and competent to function as change agents for themselves. Such reinforcement constitutes true empowerment.

In tomorrow's world, multicultural transactions will be commonplace. The currently troubling fragmentation in families and disconnection from nurturing supports will probably continue and even escalate. Strengthening and enhancing families, which must become an imperative in the work to be done, will require a strong commitment to training helpers who are highly skilled in the application of knowledge about power, diversity, and human systems.

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The rapid escalation in situations being reported in which practitioners have sexually abuse their patients or clients illustrates this potential.

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Parent Education to Battle Oppression

by Bisola Marignay

The current social service system responds to the effects of poverty and racism with crisis intervention, family therapy, parent education, peer support groups, and other services that address immediate need. However, the core need to understand oppression and develop the internal stamina to undo it usually goes unattended.

We have known for a long time that the primary effect of oppression is the negative mental state induced by the belief that the world is closed to one's own relevant participation, and that one is helpless in overcoming imposed conditions of poverty and racism. It is this state of mind that is responsible for much political and civic apathy and for the fact that the masses do not demand what is owed to them as members of this society. People need to be helped to understand that oppression is "a limiting situation which they can transform"[1] before they can become motivated to push for their own liberation. As service deliverers with frequent contact with people suffering from oppression, why do we rest with the conclusion that we are ill equipped to provide this kind of help? Why do we, too, feel helpless to initiate change?

The provider/client relationship is the primary carrier of the old postulates of inequality on which the human services institution was founded. The structure of the relationship is inherently bound to class distinctions, and by seeking to ameliorate problems in the short term, rather than helping families discover how to interact critically and creatively with reality and transform their own lives, it obstructs the maximization of human potential. Many in the family support field have neglected to reflect on the provider/client relationship and the ubiquity of that structure in service organizations of all types, including community based organizations. Many have also neglected to question other examples of enduring paternalism: the disempowering bureaucratic structure of agencies; the lack of representation of the program participants among executive directors, board members, and other decision makers; and differences in benefits received by clients and the professionals who administer programs for them. Most outrageous are the recurring promises of community-controlled services that are dismissed when programs are actually set up. These are glaring examples of the schism between ideology and practice.

Structural paternalism programs us into conformity with it by rewarding us with the power to manage, at various levels, the lives of others, and by reinforcing norms of discourse that obstruct the articulation of the paths by which the majority of people can obtain a life of dignity and provide hope for the future of generations to come. We believe that the current way to deliver service is the only one, because it is the only model we have. It keeps us enveloped in the illusion that individual problems can be resolved without the resolution of the social problems that are their basis.

How to Make the Change

To transcend our current, limited way of working with families, we must examine the contradictions inherent in our views and practice, and base the services that we provide on an ethical foundation that avows the centrality of freedom to human existence. We must help families become aware of the social context of their problems, and work with them to alleviate deeply ingrained self-doubt, so that they may be open to discover how to transform their lives.

One way of helping families heal and become empowered is demonstrated in the parent education curriculum *Parents Healing: A Way of Learning*.[2] This curriculum addresses parents' need to understand the issues and circumstances of their own lives, so that they can then give their attention to understanding what their children need to become self-sufficient, emotionally balanced human beings. Self-healing is a crucial part of this program; the basic premise is that all human beings come out of childhood with a need to heal. Helping parents understand why and how they may replicate unresolved wounds from their past by passing them on to their children is crucial to parents' ability to empathize and then change their parenting behavior.

Equally important to the change process is their understanding of the social causes of economic, educational, and health conditions that disempower them and their children. Throughout the program, a strong emphasis is placed on helping parents understand that social conditions are not caused by personal failure. Trainers are given a comprehensive overview of the means of social disempowerment, and are directed to encourage parents to assert their right to obtain necessary social benefits. The program is effective because rather than dictating rules, it provides individuals with the skills to understand and do for themselves. In gaining control over the inner domains of their lives and working outward, they experience successes that enable them to believe in their ability to make change in the world.

The core of this program can be replicated wherever service is provided. Those who work with families can assist people with their needs and at the same time help them eject images of themselves as objects of charity. We do this by recounting their rights as persons who are equal to all others, and by helping them realize their power to claim those rights. In accomplishing that, we can, together, transform the conditions of society. Each of us can begin where we are by committing to meeting families' true needs and making the issues facing families a priority in all programs as we continue to relieve pain and attend to survival.

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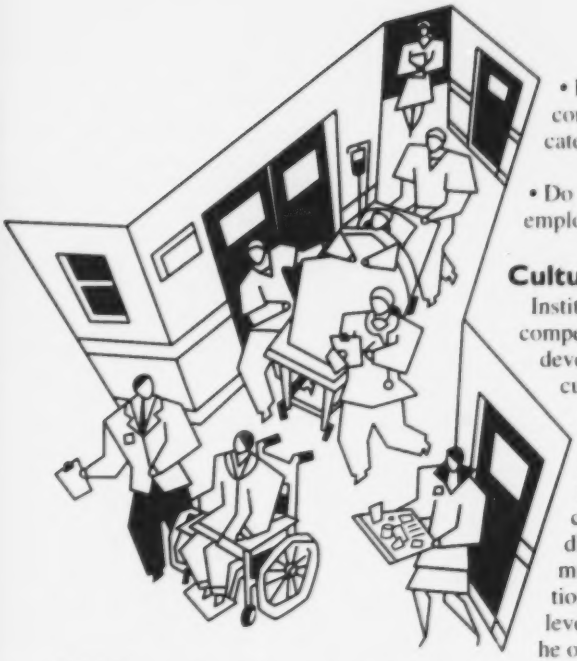
How Hospitals Move Toward Cultural Competence

Guadalupe G. Lara



During recent years, there has been an increasing awareness of the great need for culturally compatible services and culturally competent staff to increase the participation of ethnic/minority families in our hospital programs.[1] The issues that managers and staff in family-serving programs face as they strive toward cultural competence within the organization are well illustrated by the health care field.

Hospital social service programs make contact with families that might otherwise not seek support from a program, making the cultural competence of these programs especially crucial. Health care providers' and other practitioners' historical inability to relate meaningfully to ethnic minorities has been due, in part, to a lack of commitment on the part of providers. Institutions demonstrate a lack of commitment to ethnic/minority populations when they:

- Fail to enforce affirmative action hiring standards
- Lack ethnic/minority representation on their boards of directors
- Fail to integrate culturally competent practices into all job categories
- Do not connect these practices to the employee performance evaluation

Cultural Competence

Institutions that seek to be culturally competent must have an ongoing staff development program that integrates cultural characteristics of patients and families with job skills. For example, an in-service on grief and loss at a hospital would focus on the social and cultural context of the patient, and would discuss how the patient's ethnic/minority status, level of acculturation, availability of resources, and level of education would affect how he or she expressed grief.

There is a tendency to be simplistic in assessing patients who are from ethnic/minority backgrounds that are different from the worker's. Usually, the presentation of a patient's problem is complicated by a variety of factors, and it is essential for the worker to be a critical thinker.

There are many reasons given by managers in health care settings for not being culturally competent, including not having enough trained ethnic/minority workers and a lack of bilingual professionals. Yet, when the majority of the patient population is ethnic/minority and the institution continues to take a business-as-usual attitude, displaying a reluctance to take risks to serve this population, the forecast for an institution to become culturally competent is poor.

Basis of Judgment

The decisions that must be made about clients who are from a cultural background different from the worker's often present opportunities for the worker to make judgments that are value- laden and reflect the worker's personal morals rather than "starting where the client is."

The National Association of Social Workers' Code of Ethics establishes the principles of the profession, but does not address the underlying assumption that workers and employees are left to form their own moral perspective. For example, how does the employee view the client's ethnic/minority experience? Does the employee have empathy for the client's ethnic/minority situation? What are the moral and value constructs of the employee? Does the employee base judgments about patients on objective facts or on personal values? Is the employee's behavior driven by his or her emotions or by facts that relate to the patient? A close look at the quality of care given to families reveals differential treatment as a function of ethnicity.[2]

Need for Culturally Competent Practice

In an attempt to address the disparity among services to ethnic/minority families, the need for culturally competent practice has been extensively documented.[3] But findings from a national survey of child welfare workers revealed extremely little, if any, interest among workers or supervisors for training in culturally competent practice with ethnic/minority families.

These findings cause us to infer that, given this attitude on the part of workers, ethnic/minority families may be subjected to stereotyped preconceptions that impede the delivery of culturally appropriate services. The overall lack of knowledge about the importance of culture on health beliefs and help-seeking behaviors is critical for the successful assessment and treatment of our patients.

Building Competence

The need for a framework on which to build cultural competence is critical when staff, for whatever reasons, have personal values that prevent them from providing unbiased care to patients. The framework includes policies, monitoring of indicators, and links to the annual employee evaluation to ensure cultural competence.

This process of building cultural

competence should be based on the institution's mission and value statement, not on the employee's value construct. This is a process that must also include corrective action if employees are to comply. It is important to note that if the social work leadership does not reflect culturally competent practices, this process will not work.

In cases in which the organization's leadership (or the leadership of the hospital's social work unit) is not sufficiently skilled to initiate a culturally competent knowledge-building program, other steps can be taken to begin the process. A coalition with key ethnic/minority representatives can be developed to advise on policies relevant to the populations being served. If workers in the health care setting begin to take these steps to become culturally competent, we as a profession will set the tone for the hospitals in which we work, and will make major advances in the delivery of high-quality services to all families.

The social work profession has been slow to act and to take the lead in the development of culturally competent practices for our institutions. But social work is charged with advocating for these families. It must take a leadership role in initiating steps to become culturally competent.

To accomplish its goal, social work units of hospitals must:

- Work with community agencies that currently serve ethnic/minority populations

- Provide needed services in the patient's community instead of in the hospital

For example, Children's Hospital of Michigan (CHM) presents its parenting program for preventing child abuse in a local church in the African American community. Once a month, a health education program is held for all first-graders in a multicultural Detroit elementary school located in the Latino and American Indian community. These children are tracked through the sixth grade.

- Establish a parent and professional advisory board to advise on strengths and weaknesses in providing services to ethnic/minority families

- Establish an ability to provide interpretation to non- English-speaking patients and a code of ethics for interpreters

- Advertise services in the community in culturally congruent forms such as special-language radio, print, and television media

- Establish links with schools of social work to coordinate culturally appropriate placement of their students, and arrange for the professors to train staff in exchange for placements

- Develop a training program on building cultural competence in interdisciplinary practice, and market it to all hospital staff

Hospital social work units are critical, but untapped, resources for meeting the challenge of building culturally competent practices. As a profession, we must meet this challenge, which is synonymous with serving and advocating on behalf of families.

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Notes

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Helping to Build Intentional Communities

by Nancy M. Ware

An intentional community is one in which resources are galvanized to accommodate the needs of families and individuals, so that families can acquire the services that they need in order to be healthy and provide for their children. These resources include job opportunities, spiritual and religious dwellings, housing, educational settings, recreation, mental and physical health services and crisis services (hospitals, abuse and neglect systems, etc.). While intentional communities are the setting that all family support programs strive to establish, they take on special significance when practitioners are working with families of color. Practitioners must facilitate intentional communities as part of a conscious effort to support the rich cultural and ethnic variety of our society, rather than to try to force assimilation or an exclusionary process that could destroy the unique qualities of various cultural and ethnic groups.[1]

This means that practitioners must be ready to examine the environments in which families of color gather naturally, which provide them with a sense of community. The practitioner may also need to work closely with families to create settings that offer organized activities, health services, counseling, language training, job training, community meetings, and support groups for families who might otherwise not have the refuge and respite that these intentional communities offer.

Families of color require certain basics to be met in order for their communities to thrive and provide a safe and nurturing environment. As practitioners go about facilitating a sense of community through culturally appropriate services and supports, they should implement the following suggestions.

- **Shift power to the community through the families who live there.**

This can be done by encouraging culturally diverse representatives to run for political office and including family members on decision making, oversight, and policy-setting boards and commissions. These people can project an accurate picture of their culture and can increase the opportunity for families in their neighborhoods to exercise self-determination.

- **Move government services to the community.**

As fiscal pressure on states and cities to provide families with comprehensive support grows, it is even more critical to put our limited resources to work for the neighborhoods and communities that need them. Staff can be set up in some of the natural community settings that families of color use comfortably. This provides government staff with a more naturalized setting in which to accomplish their mission, makes the expertise of cultural consultants from the natural community more readily available, and gives government workers more visibility in the communities that they seek to serve, thereby easing the cultural distance. (Consider churches, community centers, housing complexes, parks, and streets for outreach work).

- **Mobilize the community's resources to meet the needs of families who live there.**

There are usually several indigenous resources available, but they are often not seen as an integrated part of the larger community. Building collaborative partnerships is useful and important to consider. The natural helpers of the community (churches, community agencies and organizations, etc.) can be a powerful voice in advocating on behalf of the needs of families. Forming collaborative relationships and integrating services can provide a means of identifying the assets of the community as well as the gaps that need to be filled. Usually, these natural helpers within communities are much more culturally sensitive and make accessing resources more comfortable for families. By pooling resources, the costs of mailings, dissemination of materials and meeting space can be cut as well. All services should be centered around the needs of the family.

- **Center the community around cultural diversity (not divisiveness).**

Practitioners must remember that the goal in supporting intentional communities is to help families to rally around their cultural heritage and strengths in a unifying and strengthening manner. This requires appreciation of all cultural and ethnic members of any given community and an attempt to support their strengths and self-sufficiency.

- **Create networks to support transient families**

The transient lifestyle that is imposed on many families of color because of homelessness, legal and/or immigration problems, job-seeking migration, and other factors challenge practitioners to create flexible support systems that will follow these families. Practitioners can put transient families n touch with local and national networks so that they are not left to drift.

They should reach out to families who must relocate and offer continuity and structure through community institutions with which the transient family has already connected (parent support groups, churches, community organizations, clubs, etc.).

The notion of intentional communities calls to mind an image of communities created for a particular purpose. Addressing the needs of all ethnic and cultural backgrounds is a challenge facing managers of urban and rural communities across America. The changing faces of families within our communities requires that practitioners become clear that the definition of community takes into account both culture and geography. Practitioners must understand what families require from outside and from within cultures so that they can thrive and contribute constructively to society.

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Assessment with Native American Families

by Amy James

Culture is one of the primary lenses through which practitioners must look at families as they conduct assessments. Many of the stresses on American Indian[1] people and other groups of people in the United States today are the result of cultural disruption and poverty. Although this article concentrates on the assessment considerations that therapists need to address when working with Native American families, these considerations have broader implications for family practitioners of all kinds and for families across the spectrum.

There are two levels of assessment to consider when working with American Indian families. At the individual level, unique issues face modern Native Americans; and at the group level, issues of assessment bring into perspective both familial and community concerns. The assessment process may give practitioners an opportunity to strengthen the therapeutic alliance and reinforce the effort to affect change.

Extended Family

Before beginning work with a family, one of the first challenges to the therapist is assessing whom to work with. Western nuclear family norms do not readily apply to American Indian families. The extended family in Native American culture has no simple definition. Depending on the tribe and clan, different people may be responsible for child rearing, moral guidance, and family leadership. Traditional child-rearing practices vary widely. In some tribes, uncles were responsible for discipline and grandmothers were responsible for childcare. American Indian psychologist Carolyn Attneave makes a compelling argument for including as many significant people as possible in the therapeutic treatment of Native American families.[2] In the course of initial contact with concerned family members, time deciding who ought to be present during therapy sessions is well spent.

Therapeutic Setting

The therapeutic setting is also worth considering. Barriers such as transportation difficulties and discomfort in non–American Indian settings are concerns for all practitioners who want to increase access to services for American Indian people. Some Native American family practitioners have encouraged the utilization of home-based therapy. Home-based therapy permits first-hand information gathering, which increases the likelihood of accurate assessments about household composition, available resources, the stress of poverty, and the level of order or chaos in the home. This method may be a way to form a therapeutic alliance with the family that will later transfer to a clinic setting.

Cultural Involvement

Assessment of the family's level of involvement with Native American culture and the dominant culture will help the practitioner both conceptualize the family's situation and formulate a treatment. Language, cultural practices, and values have a tremendous impact upon the family's ability to access resources outside of the American Indian community. American Indian families living on reservations, in rural areas, and in urban homes have different degrees of social support. The stresses of living in two worlds presents challenges to developing adaptive coping responses. John Red Horse[3] and Terry Tafoya[4] provide detailed descriptions of cultural involvement and effective interventions; their works can be invaluable resources for practitioners.

There is no separation between the physical, mental, and spiritual lives of Native American people. Successful treatments require understanding of and respect for the spiritual practice and involvement of family members. Because family discord and hardship can be attributed to spiritual concerns, involvement of spiritual leaders may be essential to facilitating change for American Indian families.

Strengths

With any family, the power of healing comes from within. Native American families are tremendously resilient. Building upon the internal resources of the family and the community at large will empower families to help themselves and offer support for others. Kinship ties and clan networks offer unique supports for American Indian people. Understanding the interconnectedness of the family will give a more complete picture of the place of the family in the greater society. There is some evidence that more traditional Native American communities have more constructive emotional outlets and intact support networks. Assessing the coping strengths of families will greatly contribute to treatment planning.

Psychosocial History

A complete history may be the most useful part of the assessment process. Practitioners working with American Indian people describe the overwhelming level of trauma experienced by individuals and families and the unresolved grief over intergenerational loss. In addition to individual family members, Native American families have lost land, language, cultural practices, life ways, native medicine, and spiritual traditions.

The loss of family members to disease and accidents at rates that far exceed national averages is a source of great concern. The ravages of poverty have left the American Indian community vulnerable to many preventable illnesses, and many Native American people are killed in auto accidents or as the result of suicide and homicide. Losing many relatives at a young age is an unfortunate fact of life for some American Indian people. The extended family ensures support but also exposes individuals to a multitude of potential losses.

Trauma includes childhood separation from family members through placement in boarding school and foster care. Physical and emotional abuse in these settings is well documented. Out-of-home placement has also interfered with the transmission of traditional child-rearing practices.

The multiplicity of loss often leaves little time to process what has happened to the family and its individual members. The magnitude of grief may be too overwhelming for traditional funeral and burial rights to assuage. Some Native American mourning practices are very

specific and brief. The Navajo, for instance, have only four days to mourn the passing of a loved one. The self-sufficient model of behavior and the high value placed on stoicism make reaching out to others in order to process this grief very unlikely. A careful, multi-generational psychosocial history will provide practitioners with information to assess the impact of trauma and loss for the family and develop objectives for working them.

Substance Abuse

One of the most devastating results of contact with Europeans has been the introduction of alcohol to American Indian culture. The American Indian community is still reeling from the impact of substance abuse in the present day. The depression and anxiety experienced by many Native American people is both attributed to and aggravated by alarmingly high rates of substance abuse.

No developmental stage is entirely free of the effects of substance abuse. The rate of fetal alcohol syndrome (FAS) and fetal alcohol effect (FAE) is very high in some Native American communities. The resulting impairments have contributed to the difficulties that many American Indian children have in school. Children are also vulnerable to substance abuse. Young children may abuse alcohol themselves, and in some communities the abuse of inhalants has been widespread. The health risks associated with abuse of alcohol and other substances has ravaged many Native American communities. Automobile accidents, cirrhosis of the liver, and other related physical symptoms of substance abuse contribute to the high mortality rates in Indian country.

Inhibitions decrease with substance abuse, and physical violence, including domestic violence, becomes more of a threat. In one Midwestern women's shelter, up to 75 percent of the cases involved substance abuse. Child abuse and neglect cases are also often reported with substance abuse issues in the family. Parents who binge drink may leave children with relatives, and these families may turn to child welfare agencies when they need help. A thorough alcohol and other drug assessment (AODA) is critical to the assessment of family functioning.

Neglect

While there is a risk of neglect associated with substance abuse, there have been historic misunderstandings regarding Native American parents neglecting their children. Social services workers have made the decision to remove children from their homes based on Eurocentric beliefs about parenting. Poverty among Native Americans has contributed to mistaken perceptions of neglect, but many cultural factors have had an impact, too.

Traditionally, American Indian parents are not physically demonstrative. This lack of physical contact has often been interpreted as an absence of affection. Native American parenting also employs natural consequences and a principle of noninterference. Children are allowed to experience the consequences of their actions, and bad behavior is often ignored. Case workers have observed parents who did not direct or admonish their children and assumed a lack of interest or caring. Mental health practitioners must assess carefully before considering interventions in cases of neglect.

Individual Diagnostic Considerations

Teresa LaFromboise describes the dual challenge of misdiagnosis and missed diagnosis when taking culture into consideration.[5] In the first case, any deviation from the majority cultural response is deemed to be pathological. In the second case, any bizarre behavior might be attributed to cultural factors rather than to true mental illness. In many cases in which non–Native American therapists would diagnose unipolar depression, anxiety disorders, or borderline personality disorder, American Indian therapists prefer the diagnosis of Post Traumatic Stress Disorder, in light of the cyclical grief, loss, and trauma experienced by much of the Native American community.

Many instruments used for therapeutic diagnosis were not developed with Native American populations in their standardization samples. Spero Manson has reviewed the studies of instruments commonly used with American Indian adults.[6] He suggests that the Beck Depression Inventory yields false positives for American Indian adolescents, and recommends instead the Inventory to Diagnose Depression.

Teresa O'Nell has discussed the results that occur when practitioners label culturally specific behaviors as disorders.[7] Wacinko, roughly translated as "pouting" has been misdiagnosed as schizophrenia. Tawatl ye sni, or Ghost sickness of the Dakota Sioux seems to be a complicated grief reaction, but has unique cultural features. Distinguishing non-psychotic visions from pathological hallucinations will be a challenge for clinicians unfamiliar with American Indian beliefs. Consultation with Native American mental health practitioners and traditional healers may be needed to assess American Indian families and family members in an informed way.

Assessment is both an initial territorial map and an ongoing process for those working with Native American families. If it is done carefully, assessment can greatly facilitate the working alliance. More information regarding assessment, instrument selection, and treatments can be found in the resources listed below.

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Notes

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Supporting Families with a Refugee History

by Ngoc-Diep Thi Nguyen

Photo by Marilyn Nolt

Refugeeism has been identified as the most critical world crisis in the twenty-first century by many who work with refugee and immigrant populations.[1] The United States is a nation of millions of refugees; in addition, there are others living in refugee camps who are waiting to enter the U.S. but have not received political asylum. In order to effectively support these individuals and their families, professionals need to be aware of the refugee experience and the common effects that this trauma has on these families. Lack of this knowledge can cause frustration and misunderstanding between program participants and service providers, and can obscure many cultural insights that would lead to productive relationships. This article will describe experiences common to refugees from many nations and discuss ways in which refugee families can be best served.

The Refugee Experience

Stephen Keller divides the refugee experience into four stages: perception of danger and threat, flight, reaching safety, and resettlement or repatriation.[2]

In the first stage, refugees see themselves as the center of violence, and yet are in a state of disbelief and deny the danger. In this stunned state, many exhibit very risky behaviors, and are thus extremely vulnerable to danger. These feelings and reactions often recur when the family is in the process of resettling in this country.

During the second stage, the flight, refugees take extraordinary risks, sometimes at the expense of other people. Many are forced to abandon loved ones, sell all of their possessions, cheat, lie, and kill in order to survive. It can be days, months, or years before they reach safety. These experiences later result in survivor's guilt, which causes refugees to deny themselves the very enjoyment and happiness that they hoped to attain through resettlement. The higher the degree of hardship and the longer the flight experience, the more traumatic the mental problems that emerge later. These can include depression, apathy, schizophrenia, and suicidal tendencies.

The third stage usually occurs when refugees reach a safe place, such as a refugee camp. There they are in limbo, waiting for various countries to decide whether or not to grant them asylum and allow them to resettle. This process can take from a few months to years. Generations of babies are born in refugee camps as families wait to be "processed." Life in most refugee camps can be described as social disorder par excellence. The refugees live in constant fear of being assaulted by gangs or individuals who take advantage of the plight of uprooted people, or being returned to the zone of danger. Violence occurs many times each day. As a result of dealing with purposeless and stress, many refugees withdraw from all stimuli and experience additional anxiety and guilt.[3] These refugees eventually cut all emotional connections and isolate themselves.

The fourth stage, resettlement, has

been studied most extensively, and is the critical stage during which family-serving professionals in the United States are likely to encounter refugees. Although many refugees are repatriated (forcibly returned to their nations of origin), those who arrive in the United States have been lucky enough to find a sponsoring nation. In the first few months following resettlement, the refugee family is mostly in shock, not only due to the drastic change in surroundings and new culture, but because they have moved from a situation of extreme danger and instability to a context of safety. In general, these families are not given much time to overcome their shock. Most are expected to find employment within three months of entry into the United States, regardless of their usual unfamiliarity with the English language and the customs of this country.

If the family manages to overcome this initial shock, the next two years constitute a period of rebuilding. The refugee family is now driven to construct a new life. Many or all family members may work two to three jobs, spend little money, and save all they can in an attempt to regain control of their lives. During this period, however, residual mental issues such as survivor's guilt and depression may resurface and result in self-isolation, hostility, and/or suicide. Many refugees, however, have accomplished major social adjustments after four or five years in this country, and many learn to come to terms with their refugee experience to some degree. After this, fewer changes occur. Intergenerational conflicts within families begin to emerge, threatening many traditional family structures. Acculturation takes place: the family, which now may include additional generations, has acquired many cultural values and beliefs of the host country and taken them as their own.

Some people who come to the United States and are called refugees would be more accurately called immigrants, and many who are treated as undocumented residents have experienced the refugee life as it is described above. In any case, if a family experiences refugee trauma, that trauma contributes significantly to the degree of difficulty that family members may experience in adjusting to American society, and it is crucial that family workers be sensitive to that fact.

How Best to Support a Family with a Refugee History

1. Acknowledge that the refugee experience is an important part of the family's history. One should be aware of the refugee phenomenon and its general affect on families. The National Immigration Forum, Inc., is a consortium of organizations that work with and advocate for the rights of immigrants and refugees in the U.S. It offers useful and up-to-date news and information on the refugee experience.[4]

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2. Help construct a history of the family's immigration experience through informal interviews. This history can be useful in building the relationship and gives the practitioner the specific information about that family's experiences, including the trauma of being uprooted, that he or she needs to be able to support all family members. The questions can be open-ended, inviting the family to tell their story and how they coped with the trauma of their refugee experience.

3. Most refugee communities in the United States have their own network of support. Mutual aid associations and ethnic organizations are good resources to help identify additional support for the family. These community connections are crucial to the adjustment success of these newcomers. Practitioners need to seek these resources and use them as sources of information for themselves as well as referring families to them.

4. Since social service professionals are often those closest to these families, they are the first to recognize symptoms of mental disturbances and family issues that refugees are facing. It is important to keep in mind the traumatic experience that these families are experiencing, and to allow extra time for adjustment. But it is wise to watch for signs of these problems and contact mental health professionals if assistance is needed.

5. Finally, different social service organizations that serve the same refugee community should be proactive and facilitate a social and cultural network among the families whom they serve. Such connections are a vital part of support for these families and greatly enhance their adjustment to their new environment. This network must engage refugee families in leadership roles from the beginning, helping them build not only a new life for themselves, but a community among themselves and with the larger American community.

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Notes

[1] A refugee is "an individual who, owing to well-founded fear of being persecuted for reasons of race, religion, memberships of [sic] a particular social group or political opinion, is outside of the country or nationality and is unable or, owing to such fear, unwilling to avail him/herself of the protection of that country; or who, not having a nationality and habitual residence as a result of such events, is unable or, owing to such fear, unwilling to return to it." *United National Convention Related to the Status of Refugees*. Article 1, 1967.

[2] KELLER, S. L. (1975) "The states of refugeeism." In *Uprooting and social change: The role of refugees in development*. (India: Manohar Book Service).

[3] BAKIS, E. (1955) *D.P. apathy in flight and resettlement*. (Paris: UNESCO).

[4] National Immigration Forum, Inc.; Frank Sharry, Director; 220 I Street NE, #220; Washington, DC 20002; 202/544-0004.

Storytelling as the Life Force of an Organization

by Raymond Reyes

Photo by Jennifer Brinkman

It is difficult to experience the clear voice of our ancestors in our high-tech, low-touch world. Modern life, with all its noise and distractions—express mail, voice mail, faxes, phones, and computers—makes their stories difficult to hear or see. However, we do have each other. Our experiences with storytelling generates a symbolic interaction[1] in which meanings are modified through an interpretative process based on continuing interaction with each other. The power of change and transformation inherent in storytelling can result in the creative problem solving that family practitioners need in order to support families of a variety of cultures.

The Story of Anna and Flynn

In his book *Mister God, This is Anna*, Flynn tells a provocative story about the inspiring relationship between an ancient one in a young body (Anna) and a young one in an old body (Flynn).[2] According to Flynn, Anna was a theologian, mathematician, philosopher, poet and gardener. At five years old she knew the purpose, of being, had mastered the meaning of love, and was a personal friend and helper of the Creator.

In the book, the evolution and transformation of this relationship occurs through dialogue and storytelling. One particular dialogue between Anna and Flynn demonstrates the significance of narrative expression and metaphor development in our personal and organizational lives. It teaches us how one can learn a spiritual principle from a lesson on the physics of light refraction.

Anna and Flynn were experimenting with the colors of the spectrum with the aide of a prism; Anna gazed through Isaac Newton's colored spinning disc and mixed all of the colors of the spectrum and turned them back to white. Flynn explained that light took on the color of the glass through which it was transmitted, and that the color of a yellow flower occurred because the flower absorbed all of the colors of the spectrum except for yellow, which was reflected back to the viewer. After a long, contemplative pause, synthesized Flynn's observations: "Oh! Yellow is the bit it don't want. ... So its real color is all the bits it do want."

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According to Anna, every human being develops a wide assortment of bits of glass labeled *good, bad, nasty, beautiful.* People get into the habit of slipping these bits of glass over their inner eyes and seeing things according to the color, label, or value of that particular piece of glass. Anna went on to explain how "Mister God was ... different from a flower," and that he was "invisible,"

> ...because he accepted everything, because he wanted everything and did not reflect anything back! You know, no gossip, no criticism of others or no blaming others. Of course you could cheat if you wanted to: you could wear your bit of colored glass marked *Mister God is loving* or the bit marked *Mister God is kind*, but then, of course, you would miss the whole nature of Mister God. Just imagine what kind of an "object" Mister God must be if he accepts everything, if he reflects absolutely nothing back.[3]

According to Anna, such detachment and acceptance is achieved by throwing away our pieces of colored glass and seeing clearly. For Anna, this is being the sacramental beholder, i.e., a real God. Anna's dialogue with Flynn also offers interesting insight into the role of metacognition (self-talk), storytelling, and metaphoric expression in our noble efforts to clearly communicate to ourselves and to others. Numerous cognitive psychologists, communication experts, and educational researchers have convincingly demonstrated the poet William Blake's notion of "as I think, I am."[4]

What's In a Story?

To some extent, Anna is affirming the operational assumption on which neurolinguistic programming (NLP) is based, i.e., if a person can control and change his or her verbal and nonverbal images, one can control and change behavior. More recently, gurus in the self- improvement movement (Anthony Robbins, Steve Covey, and John Bradshaw, to name a few) have emphasized the power of words and mental imagery in the change process. Much of this "self-talk" is based upon the interactive dynamics of words, pictures, and feelings. For example, the words we say to ourselves (Anna's bits of glass) create pictures in our mind's eye, and these images evoke emotion or feeling. The emotional intensity toward the words and pictures provide the motivational source and force which propels behavior.

The story may be the basic building block, the engram, of human learning. People love stories. They love telling them and they love hearing them. Good stories make camp fires worth lighting, cocktail parties worth attending, college classes worth taking, and reunions worth holding. Stories instruct, inform, entertain, warm, and warn. A good story touches something familiar within us, yet shows us something new about our lives and how we experience our world. It has even been speculated that the innate desire to tell and hear stories led to the invention of writing, printing, movies, radio, and television.

In storytelling, the stimulus of words brings about the production of inner images, an extraordinary creative interplay involving the entire brain. Each new story requires a whole new set of neural connections and reorganizations of visual activity. Television, in contrast, provides all the action synthetically and limits the number of neural structures, regardless of content. The negative or damaging dimensions of television have little to do with content, but rather, they arise from the synchronistic pairing of imagery with sound. This provides a synthetic counterfeit of what the brain itself is supposed to produce in response to language.[5]

We live our lives immersed in stories that are transmitted through many, many media. Newspapers, radio, the information highway, and television feed us a daily diet of news; friends and coworkers tell us about their weekends; parents punctuate their children's days with bedtime stories; elders recall family history over holiday meals; priests weave parables into Sunday sermons; and many of us spend leisurely hours indulging in murder mysteries, romance novels, sitcoms, or movies.[6] Some stories simply entertain, inform, or teach us, while others move us deeply and challenge us to change or remove our entrenched ways of viewing situations.

In many American Indian tribal groups a story is seen as having a life of its own. Joe Bruchac, an enrolled member of the Abenaki Nation in Vermont and writer, says that storytelling is "almost life calling the gods. A powerful spiritual presence makes itself felt and one can be quite literally swept away by it."[7] Such stories carry an energy—a truth, a lesson, an insight, an emotion—that can enter our being and connect us to a distant past and to powerful primal forces. When you are socialized into a language or master a culture's symbolic life through narrative expression (storytelling), you are an inheritor of the collective wisdom of the people who have gone before you. Stories can play a stabilizing cultural role for practitioners and the families they serve. "Without air our cells die, without a story our selves die."[8]

A story provides structure for our perceptions. In organizations, including those who serve families, stories can play a dual role: They can act as powerful directives for employee and employer behavior, and they can teach specific lessons which can prepare families and individuals for the change process. Stories and metaphors can construct bridges of coherence and meaning between our personal identity (the authentic self) and the professional role we play within an organizational culture.

Narrative Expression in Organizational Life

Understanding the frequently told stories of an organization is one of the keys to understanding the values and world view that arise from that organization's culture. Stories provide an effective vehicle for conveying an organization's interpersonal norms. Organizational stories happen naturally as a way of telling one's perceptions of past events, problems, or people. Because these stories can be heard at all levels and within all personnel groups of an organization, stories enjoy widespread acceptance as a means of communication. They are easy to follow, often entertaining, and more likely to be remembered than other forms of written or oral communication.[9]

Stories differ from gossip and other forms of organizational communication in that they possess a setting, a cast of characters, and a plot in which some sort of crisis is resolved.[10] In an organizational story, the employee is akin to an actor in a play. For example, an actor's motivation and perceived sense of good and evil are driven by the playwright's own interpretation of these principles. Likewise, the traits, behaviors, and natural drives of characters in an organizational story are colored by the storyteller's perceptions.

In addition, stories are unique and powerful because they contain an implicit ethic or sense of morality. Stories give voice to a morality that reflects the belief systems of the storyteller.

Stories act as a cultural code and, in an organizational or leadership context, help employees make sense of their workplace and their reasons for working. For those who work with families, stories can provide unique insight into the cultural raison d'etre supporting emotions or behaviors that are based on a different value system. Like stories in our private lives, organizational stories are derived from shared norms and values or belief systems. Deal and Kennedy refer to this shared perspective as "the way we do things around here."[11] People struggle for common ground and purpose in the context of these belief systems or socially constructed realities.

Turning Up the Truth Through Stories

Anyone who has ever played the telephone game or round robin exercise knows that stories are retold to reflect the teller's interpretation. In this context, stories are seldom completely factual and reflect what people believe *should* be true. Consequently, more than any other communication method, stories permit educators, leaders, and researchers to examine perceptions that are often filtered, denied, or not in a person's consciousness during a more traditional interview or conversation. I have found the perceptions of heroes and villains in an organizational story to be highly revealing and insightful. These perceptions can easily become indicators for the interactive expectations of organizational behavior and performance.

How Storytelling Can be Transformational

Transformational leadership is a process in which "leaders and followers raise one another to higher levels of morality and motivation."[12] A transformational leader can influence an organization's morality or motivation through the utility of narrative expression and metaphor. "I think most of us are looking for a calling, not a job," says Nora Watson.[13] "Most of us, like the assembly line worker, have jobs that are too small for our spirit. Jobs are not big enough for people." Her words underscore how important it is to find some greater sense of purpose in our day-to-day working lives. The enthusiasm, energy, and provocative nature of a good story may not change the nature of work on the assembly line, but they surely can make that work more meaningful and enjoyable. Many times the capacity for action and the ability to solve problems can be enhanced by a leader's willingness to discover and use the power of narrative expression.

While studies of organizational phenomena have been plentiful, the use of stories as an aspect of leadership or a method of systematic inquiry is fairly recent. Narrative expression or metaphor development as a corporate training or management technique has yet to acquire the status of a full-fledged leadership strategy. Undoubtedly, stories were our first teaching medium. But as a modern educational technique, the story has met with some resistance. Conventional wisdom says that putting information into story form to pass it along from person to person is too indirect and is an inefficient method for the learning needs of a highly technical and industrialized society.

There have always been professional storytellers: griots, minstrels, medicine people, healers and troubadours. However, in this country storytelling and other forms of narrative expression went underground or disappeared. It appears that since the advent of television, no one except parents, grandparents, and librarians have told stories. Instead, stand-up comics and sitcoms have taken the place of swapping stories on the front porch. There is a profound void or vacuum, and people are beginning to rise to fill it. Individuals and organizations are becoming increasingly more interested in the various self-improvement or professional development programs that are based on metacognition research, brain research, self-talk principles, and neuro linguistic programming.

As we search for ways to heal ourselves, and to improve our ability to listen to and learn from each other, we must hope that stories and storytelling will continue to flourish. Indian people believe that stories will be our companions as long as there is life on this Earth Mother. I recently heard Oren Lyons, Faith Keeper of the Onondaga Turtle Clan, say: "Life will go on as long as there is someone to sing, to dance, to tell stories, and to listen."

One of my favorite lines from Tennessee Williams' *A Streetcar Named Desire* is when Blanche DuBois forcefully declares, "I don't want reality, I want magic." The magic is in our stories. The magic is in narrative expression and metaphor development! The reality is being bold and adventurous enough to follow the example of our five-year-old philosopher Anna, and just tell it like it is! In The Spirit Of Our Ancestors, May The Blessings Be!

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Notes

[1] BRUNER, J. (1986) *Actual minds, possible worlds.* (Cambridge, Mass.: Harvard University Press).

[2] FLYNN (1974) *Mister God, this is Anna.* (New York: Ballantine Books).

[3] Ibid., p. 43.

[4] BANDLER, R. & J. GRINDER (1979) *Frogs into princes: Neuro linguistic programming.* (Moab, Utah: Real People Press).

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[5] PEARCE, J. C. (1992) *Evolution's end: Claiming the potential of our intelligence.* (New York: Harper Collins Publishers).

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[7] BRUCHAC, J., and M. CADUTO (1992) *Keepers of the animals teacher's guide: Native American stories and wildlife activities for children.* (Golden, Col.: Fulcrum).

[8] ZEMBE, R. (1991) "Storytelling: Back to the basics." *Training Magazine* 4, 44–51.

[9] MARTINE, J. & M. E. POWERS (1979) "If case examples provide no proof, why underutilize statistical information?" Paper presented at the meeting of the American Psychological Association, New York, September.

[10] It is interesting to note that "crisis," in Greek, means "a call for new judgment."

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[12] YUKL, G. (1989) *Leadership in organizations.* (Englewood Cliff, N.J.: Prentice-Hall, Inc.)

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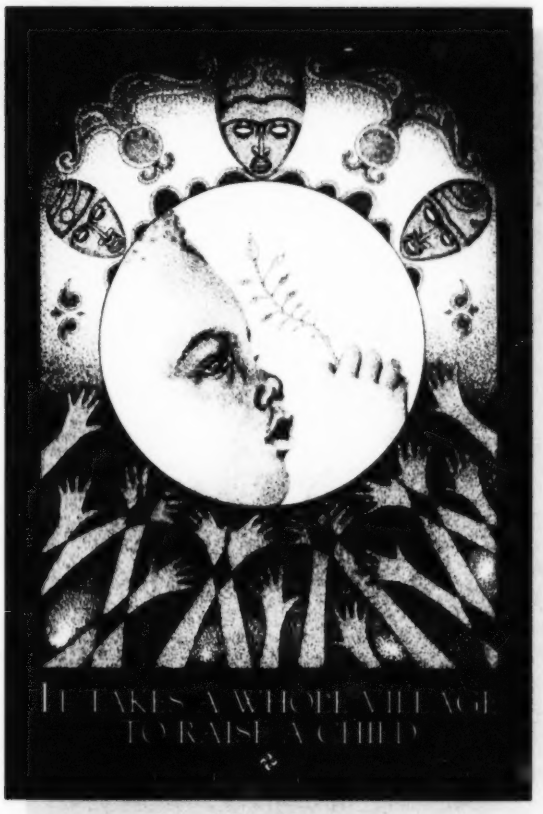

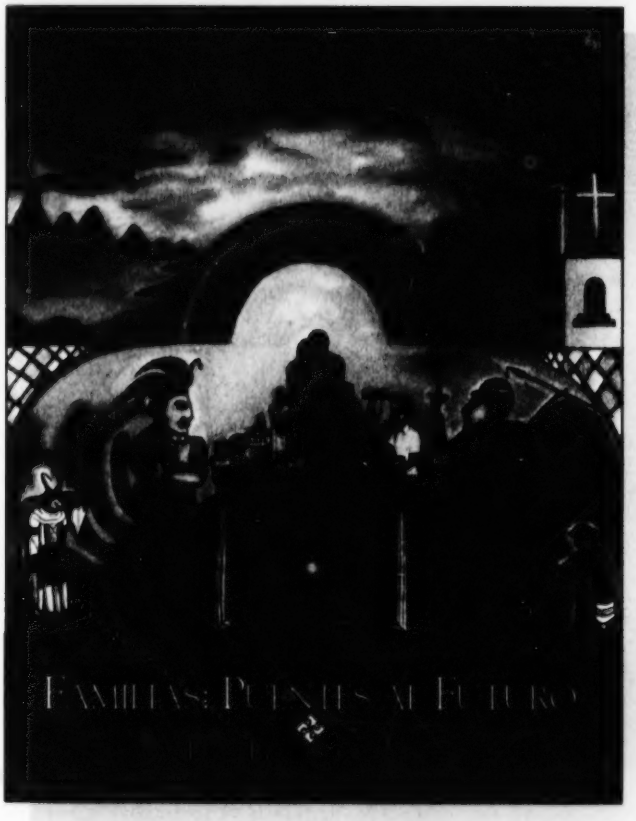

It Takes a Whole Village to Raise a Child

Christopher Palmer, artist
(24" x 36" black and white poster, with three varnishes, on 80# dull enamel)
Item No. PO1
Members: $20; Non-members: $25

This unframed, art-quality poster is a variation of the cover of our spring 1993 FRC *Report*, a special issue on African American families. Perfect for home, office, or family support program. Order for yourself or as gifts.

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Families: Bridges to the Future

Miguel Jimenez, artist
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We'll mail your posters in a protective tube anywhere in the U.S. (include $5 for the shipping of up to five posters; call 312/341-0900 for shipping cost on larger orders). You can pay by:

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Phone: Call 312/341-0900 and have your credit card information ready

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Daytime Phone _____

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Signature _____

Organizations

The following organizations provide training and/or materials to individuals interested in cultural competence. Some are organizations that deal directly with family support issues; others focus on the issues of cultural diversity and cultural competence in areas that are related to family support, such as child welfare and poverty research.

California Tomorrow
Fort Mason Center, Building B
San Francisco, CA 94123
415/441-7631 (phone)
415/441-7635 (fax)
Produces publications and provides consultation and technical assistance designed to help schools, agencies, and policymakers develop services and programs that promote an equitable multicultural, multiracial, and multilingual society.

Center on Fathers, Families, and Public Policy
200 South Michigan Avenue, 16th Floor
Chicago, IL 60604
312/341-0900 (phone)
312/341-9361 (fax)
Examines the legal and social service support systems available to never-married, low-skilled, and low-income fathers. Works to educate the public and policymakers about the need for public policies that will assist the never-married, low-income father in moving to complete involvement with his child or children.

Committee for Hispanic Children and Families, Inc.
140 West 22nd Street, Suite 301
New York, NY 10011
212/206-1090 (phone)
212/206-8093 (fax)
Seeks to strengthen Latino family relations and increase Latino participation in policy development, debates, and implementation. Has materials related to Latino children and families.

Healing Racism, Inc.
P.O. Box 110
Evanston, IL 60204
708/492-0123
Provides workshops and facilitator training in 40 cities nationwide on "Healing Racism: Understanding the Cycle of Racial Conditioning."

Illinois Ethnic Coalition
55 East Monroe #2930
Chicago, IL 60603
312/368-1155 (phone)
312/251-8815 (fax)
Provides training on cultural awareness, coalition building, and cultural diversity for nonprofit organizations and corporations. Provides resources and bibliographies on these issues.

Institute for the Advanced Study of Black Family Life and Culture
175 Filbert Street, Suite 202
Oakland, CA 94607
510/836-3245
Provides in-service training, workshops, and consulting to agencies across the United States who work with African American families and produces materials—with a social-psychological focus—on African American families.

Ethnic Minorities Section National Council of Family Relations
3989 Central Avenue NE, Suite 550
Minneapolis, MN 55421-3921
619/781-9331 (phone)
619/781-9348 (fax)
Provides a forum for family life researchers, educators, and practitioners to share in the development and dissemination of knowledge about families and family relationships. Among the several special-interest sections of NCFR is the Ethnic Minorities section, which promotes research and education on ethnic minority families.

National Indian Child Welfare Association
3611 SW Hood Street, Suite 201
Portland, OR 97201
503/222-4044 (phone)
503/222-4007 (fax)
Provides cultural competency training workshops for family services providers with the intent to develop this competency through the policies, procedures, practices, and values of an organization. In particular, NICWA's workshops examine how problem identification & solution seeking are shaped by world view and how service providers can adapt their services to better meet cross-cultural challenges of working in diverse communities.

National Practitioners Network for Fathers and Families
330 Seventh Avenue, 14th Floor
New York, NY 10001
212/465-2044
Is comprised of service providers, researchers, policymakers, and funders who share and provide information on fathers and families. Seeks to educate the public on developments in the field of fatherhood and family support.

People of Color Leadership Institute
714 G Street SE
Washington, DC 20003
202/544-3144 (phone)
202/547-3601 (fax)
Seeks to develop specific strategies and approaches that can assess and enhance the cultural competency of child protection agencies. Develops materials on cultural competence in relation to addressing issues of child abuse and neglect and conducts cultural competence workshops.

Poverty and Race Research Action Council
1711 Connecticut Avenue NW, Suite 207
Washington, DC 20009
202/387-9887
Conducts research on the intersection between poverty and race in the United States. Has resource materials on ways to alleviate poverty in minority communities.

Quality Education for Minorities
1818 N Street NW, Suite 350

Washington, DC 20036
202/659-1818
Has implemented a series of projects to develop model approaches for improving education for racial minorities and assists communities in building state and local alliances to meet the educational needs of minority students.

Ujamaa Counseling and Consulting

Ujamaa Family Life Project
2616 Old Wesley Chapel Road #105
Decatur, GA 30034
404/981-7261 (phone)
404/288-8786 (fax)
Offers facilitator-training workshops in parent education for African Americans. Workshops employ dialogue and problem-posing educational methods to train facilitators in engaging parents on issues confronting them in their lives. Training can be arranged for one organization or a group of staff members of several different organizations.

World of Difference Anti-Defamation League

823 United Nations Plaza
New York, NY 10017
212/490-2525
The four components of the World of Difference cultural diversity program are: Classroom of Difference (focuses on schools), Community of Difference (trains communities on cultural diversity), Campus of Difference (works with college faculty, staff, and students), and Workplace of Difference (trains nonprofit organizations and corporations on cultural diversity).

Individual Trainers and Consultants

Following is a brief list of individuals who provide training and consultation on topics related to culture and family-centered practice. This list is by no means comprehensive. If you know of other trainers and consultants on these subjects, please contact FRC and tell us about them, so they can be added to our database.

Makungu Akinyela

Ujamaa Family Life Project
2616 Old Wesley Chapel Road #105
Decatur, GA 30034
404/981-7261 (phone)
404/288-8786 (fax)
Subjects: parent education for African Americans, cultural competence
Related publications: "Beyond Empowerment: Diversity, Cultural Democracy, and the Family Support Movement," Commissioned Paper III of the Family Resource Coalition's Best Practices Project.

Marva Benjamin

Director
CASSP T.A. Center
Georgetown University
3307 M Street, N.W.
Washington, D.C. 20007-3935
202/687-5000 (phone)
202/687-1954 (fax)
Subject: developing cultural competence in social service agencies

John Castillo

Executive Director
Southern California Indian Center, Inc.
P.O. Box 2550
Garden Grove, CA 92742
Subject: Native American families in urban areas

Hedy Chang

Co-Director

Cecelia Leong

Project Associate
California Tomorrow
Fort Mason Center, Building. B
San Francisco, CA 94125
415/441-7631 (phone)
415/441-7635 (fax)
Subject: policy and programmatic implications of diversity
Related publications: *Drawing Strength From Diversity: Effective Services for Youth and Families* (to order, see below); and *Affirming Children's Roots: Cultural and Linguistic Diversity in Early Care and Education.*

Leon Chestang

Dean
Wayne State University
School of Social Work
5557 Cass
Detroit, MI 48202
Subject: identity issues and social work practice

Terry Cross

Director and Founder
National Indian Child Welfare Association
3611 Southwest Hood, Suite 201
Portland, OR 97201
503/222-4044 (phone)
503/222-4007 (fax)
Subjects: child welfare, cultural competence (see article, this issue)
Background: Primary Consultant for the National Resource Center on Culture and Family-Centered Practice. Twenty years' experience in child welfare, 10 years in direct work with children and families. Mentor of this issue of the FRC *Report.*
Related publications: *Heritage and Helping and Positive Indian Parenting* (curricula, available from NICWA) and *Toward a Culturally Competent System of Care* (Georgetown University)

Kathy Germann

P.O. Box 5054
Madison, WI 53705
608/233-6757
Subjects: diversity issues, multicultural organizational development, communication skills, conflict transformation, team-building, training design
Audiences: children; professionals in human services, health care, law enforcement, and business
Background: Twelve years conducting workshops in human relations issues. Colleges educator. Was director of a YWCA, training unit manager in a human services agency.

Vida Groman

216 Oak Street
Madison, WI 53704
608/242-1482
Subjects: group dynamics, diversity issues, communication skills, conflict transformation, and team building
Background: Was trainer on abuse of alcohol and other drugs, family support guidance counselor, and co-director of counseling and training organization.

Liang Ho

5529 1/2 North Kenmore #2A
Chicago, IL 60640
312/728-8642 (phone)
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Subjects: cross-cultural communication, working with individuals from different cultures, teaching in a multicultural

classroom
Audiences: employees in the private sector, nonprofit organizations, and government; educators, counselors, and school officials
Background: a consultant/trainer for over 15 years; has conducted training workshops in many locales, including Hawaii, California, Illinois, New Zealand, and Japan.
Related publication: "Cross Cultural Swinging: A Handbook for Self- Awareness and Multicultural Living!"

Denise Jess
829 Jenifer Street
Madison, WI 53703
608/258-9652
Subjects: disability and other diversity issues, community building, anti-bias education, curriculum development, media literacy
Background: multi-aged, learner-centered elementary education (10 years); co-leader of Wisconsin Educators for Social Responsibility, a grassroots organization to teach active participation in the world community

Ernestine Jones
President
Black Administrators in Child Welfare
1321 Passage Drive
Odenton, MD 21113
Subject: mental health advocacy in African American communities

Theresa LaFromboise
Associate Professor,
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Subject: cultural competency and family assessment issues

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Subject: cultural competence in management and organizational behavior

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Subject: acculturation and psychiatry

May Kwan Lorenzo
215 Tappin Street
Brookline, MA 02146
Subject: family systems in Asian communities

Bisola Marignay
Flame Educational Services
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Chicago, IL 60645
312/761-9122
Subject: childrearing practices in diverse communities

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Executive Director
Committee for Hispanic Children and Families
140 West 22nd Street, Suite 302
New York, NY 10011
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212/206-8093 (fax)
Subjects: child welfare, cultural competence
Background: cultural competency training work with New York State and with the Child Welfare League of America

Deborah Nicholson
351 Hillcrest Avenue #C-11
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404/373-9071
Subject: cultural diversity as it relates to strategic planning and implementation processes

Elaine Pinderhughes
Professor & Chairperson,
Clinical Sequence
Boston College
School of Social Work
McGuinn College
Chestnut Hill, MA 02167
617/552-4046 (phone)
617/552-3199 (fax)
Subject: how cultural awareness can revolutionize practice of clinical social work and psychology
Related publication: *Understanding Race, Ethnicity, and Power: The Key to Efficacy in Clinical Practice* (to order, see below)

Raymond Reyes
Indian Education Center
School of Education
Gonzaga University
Spokane, WA 99258-0002
509/328-4220 x 3593 (phone)
509/324-5965 (fax)
rreyes@soe.gonzaga.edu
Subjects: developing cultural competence, organizational behavior

Brenda M. Rodriguez
Senior Training Specialist
State Technical Assistance and Training for Effective Systems (STATES) Initiative
Family Resource Coalition
200 South Michigan Avenue, 16th floor
Chicago, IL 60604
312/341-0900 (phone)
312/341-9361 (fax)
Subjects: cultural diversity, power and cultural equity, multicultural education, community and leadership development, intercultural communication, program development
Background: Has been Director of Training and Special Programs for the InterAmerica Intercultural Training Institute, Program Director of the Women's Educational Development Center at the Illinois Institute of Technology in Chicago, and Multicultural Resource Coordinator for Boulder County Community Services in Colorado.

Denise Rosario
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Coalition of Hispanic Family Services
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718/497-9495 (fax)
Subject: family assessment and Latino families

Moira Shek
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Subjects: cultural competency in relation to Asian communities, strategic planning, local implementation of the federal Family Preservation and Support Services Program

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215/765-3833 (fax)
Subject: families and identity development, Afrocentric models of family assessment

Jewel Taylor-Gibbs,
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Subject: identity issues and social welfare

Jerry Tello
c/o Cara y Corazon
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Hacienda Heights, CA 91745
818/333-5033 (phone)
818/333-5033 (fax)
Subjects: development of treatment and community mobilization prevention programs focused on child, family, and community strengthening; cultural competence
Background: founder of Cara y Corazon, a Latino family strengthening program; is also involved in the National Compadres Network; has developed cultural competency/cultural democracy training curricula.

Vinh The Do
Multicultural Specialist
Portland Public Schools
Bilingual School
531 S.E. 14th
Portland, OR 97214
Subject: acculturation in education

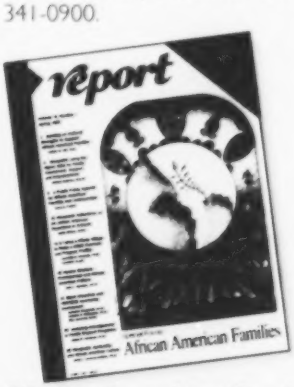
Cherundi Van-Si
Laotian-Refugee Program Coordinator
Children's Services Division
815 N.E. Davis
Portland, OR 97232
Subject: Asian life ways

Bette Wilson
Director of Multicultural Education
Multicultural Resource Center
715 North Harvey
Oak Park, IL 60302
708/524-3074 or 708/524-3048 (phone)
708/524-7841 (fax)
Subject: Multicultural education training
Audiences: teachers, parents, and students
Publications: *The Holocaust, Rainbow Activities, Harambee, Kaleidoscope*
Background: Has taught for 35 years. Worked with the Human Relations Department at the Berkeley Unified School District in Berkeley, California; Illinois State Board of Education/Urban and Ethnic Education Division; and North Central Regional Educational Laboratory.

Linda Wong-Kerberg
Center for Women's Studies and Services
2467 E Street
San Diego, CA 92102
619/233-8984
Subject: cultural diversity within Asian communities

Suggested Reading

There are many fine resources on culture and family-centered practice, including those listed under their authors' name above, and in the endnotes to articles in this *Report*. Many of the organizations listed above can recommend resources. The resources listed below are available from the Family Resource Coalition, 312/341-0900.



African American Families
Members $4; Non-members $5
Vol. 12, No. 1 (Spring 1993)
Family Resource Coalition Report, 27 pp.
This report offers a range of articles exploring the diversity, character, and strengths of African American families and African American culture. It also includes discussions of public policy and examples of successful programmatic strategies for empowering and strengthening African American families and communities.

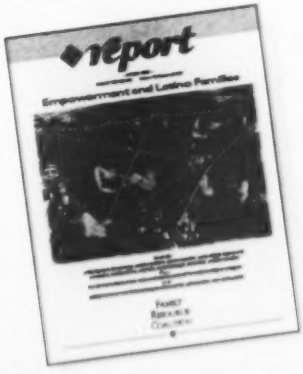
Black Families
Members and Non-members $24
by Harriette Pipes McAdoo, ed.
(Sage Publications, 1988, 232 pp. paper)
This volume explores contemporary African American families and the diversity they represent in their value systems and lifestyles. A springboard for understanding the range of African American families, it provides a way for family support practitioners and policymakers to examine new and varied interpretations of African American family experiences.

Climbing Jacob's Ladder
Members and Non-members $27
by Andrew Billingsley, PhD.
(Simon and Schuster, 1988, 218 pp., paper)
Taking up where he left off in *Black Families in White America* Billingsley describes the major economic and social forces that have led to the socioeconomic situation of African Americans today.

Diversity in Families
Members and Non-members $49
by Maxine Baca Zinn and
D. Stanley Eitzen, eds.
(Harper Collins College Publishers, 1993, 528 pp., hardcover)
Unlike most textbooks on the family, this highly regarded college-level sociology books treats diversity as the norm in modern family life, exploring the many varieties of familial relationships found in American society today. Viewing the family on both the macro and micro levels, it examines the influence of larger social trends on personal experience with particular attention to gender, race, class, and economic factors. The text is especially strong in its use of current feminist scholarship and conflict theory.

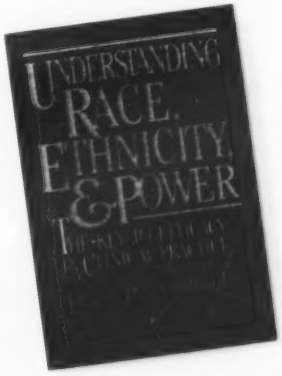
Drawing Strength From Diversity: Effective Services for Youth and Families
Members and Non-members $22
by Hedy Nai-Lin Chang, Denise De La Rosa Salazar, and Cecelia Leong
(California Tomorrow, 1994, 125 pp., paper)
This report examines how race, culture, and language affect current attempts to reform health and human services. It profiles promising innovations across the country and some of the real-life challenges facing reformers.

Empowering Hispanic Families: A Critical Issue for the '90s
Members and Non-members $20
by Marta Sotomayor, ed.
(Family Service America, 1991, 214 pp., paper)
This collection of papers informs and guides discussion on the service needs of Hispanic families and lays a foundation for understanding the strengths of and the centrality of family to the Hispanic population.



Empowerment and Latino Families
Members $8; Non-members $10
(Vol. 13, No. 3/4)
Family Resource Coalition Report, 1994-1995, 47 pp.
A collection of cutting-edge articles on Latino families, family support, and empowerment, by leading Latino scholars and practitioners. Topics include: an in-depth look at what makes a grassroots program work for Latino families, child welfare that builds on cultural strengths, empowerment practices, Latino poverty and health, and public policy issues facing Latino families. This *Report* also profiles six innovative family-supportive programs.

Programs for Hispanic Families
Members $2; Non-Members $3
(Vol. 6, No. 2 (1987))
Family Resource Coalition Report
This report contains articles on Latino families in the areas of health, public policy, law, bilingualism, education, and services delivery. It also discusses lessons learned from one community-based family support organization in working with Latino families.



Understanding Race, Ethnicity, and Power: The Key to Efficacy in Clinical Practice
Members and Non-members $35.00
by Elaine Pinderhughes
(Free Press, 1989, 269 pp., hardcover)
Pinderhughes grapples with the tough issues of race, ethnicity, and power and offers a thoughtful approach to developing cultural sensitivity. She shows how cultural awareness can revolutionize the practice of clinical social workers and psychologists.

Working With African American Families
Members $25; Non-Members $35
by Carolyn Ash
(1994, 100+ pp., loose-leafed)
If you are a program provider or an advocate working with African American families, this expandable loose-leaf guide is a must- buy. More than 100 pages of upbeat, annotated resource references highlight useful books and articles, curricula, and national and local organizations, and elaborate appendices.

Note: This resource file is intended as a guide to assist family support practitioners who seek more information on cultural competency and related issues. It is not a comprehensive list of resources; nor an endorsement of the training practices and publications of any organization or individual.

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About the Family Resource Coalition

The Family Resource Coalition is a membership, consulting, and advocacy organization that has been advancing the movement to strengthen and support families since 1981. The family support movement and FRC seek to strengthen and empower families and communities so that they can foster the optimal development of children, youth, and adult family members. FRC builds networks, produces resources, advocates for public policy, provides consulting services, and gathers knowledge to help grow the family support movement.

Our network ranges from those working on the frontlines with families in local communities, to state officials grappling with how best to deliver services, to Capitol Hill public policy analysts, to academicians—all contributing their important perspectives. We maintain the nation's largest database on family support programs and build our base of information through continual collaboration with family support scholars and program providers.

Our day-to-day work includes:

- Providing technical assistance, training, and consulting services for programs, schools, and government agencies to link family support to other services for children and families
- Communicating family support issues and information to policymakers
- Tracking federal, state, and local policy initiatives, and making this information available to Coalition members and others
- Providing leadership at the national level to plan strategy and gain resources for the continued growth of the field
- Collecting and disseminating current knowledge on program design, administration, staffing, financing, and outcomes
- Publishing current theory on family support issues as well as materials on how to start and manage programs
- Publishing the highly acclaimed *FRC Report*, a quarterly periodical devoted to family support issues, and *FRC Connection*, a bimonthly networking newsletter for Coalition members
- Sponsoring national conferences and other meetings
- Encouraging information flow, networking, and collaboration among local programs.

For more information on joining the Family Resource Coalition or to receive a catalog of our publications and services, contact us at 200 S. Michigan Ave., 16th Floor, Chicago, IL 60604, 312/341-0900 (phone), 312/341-9361 (fax) or via HandsNet at HN 4860.

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